

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000006173

Entity Name: LESTER PARKER CENTER FOR SPECIAL NEEDS, INC.**Current Principal Place of Business:**4888 DAVIS BLVD
#204
NAPLES, FL 34104**Current Mailing Address:**4888 DAVIS BLVD
#204
NAPLES, FL 34104 US**FEI Number: 27-2972398****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PASS, DERREN M
1322 CORSO PALERMO CT 1
NAPLES, FL 34105 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** DERREN M PASS

04/14/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DP
Name	HAWKINS, NEIL
Address	1322 CORSO PALERMO CT 1
City-State-Zip:	NAPLES FL 34105

Title	DV
Name	DAVIS, MICIAH A
Address	1322 CORSO PALERMO CT 1
City-State-Zip:	NAPLES FL 34105

Title	DST
Name	JAMES, TINA L
Address	1322 CORSO PALERMO CT 1
City-State-Zip:	NAPLES FL 34105

Title	D
Name	DAVIS, QUENETTE A
Address	1322 CORSO PALERMO CT 1
City-State-Zip:	NAPLES FL 34105

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: QUENETTE DAVIS**DIRECTOR**

04/14/2022

Electronic Signature of Signing Officer/Director Detail

Date