

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18157

Entity Name: MEMORIAL PARK ASSOCIATION, INC.

FILED
Apr 27, 2024
Secretary of State
9791522159CC

Current Principal Place of Business:

1650-302 MARGARET ST., #322
JACKSONVILLE, FL 32204-3869

Current Mailing Address:

PATRICK EMMET, PRESIDENT
C/O MEMORIAL PARK ASSOCIATION 1650-302 MARGARET STREET, #322
JACKSONVILLE, FL 32204-3869 US

FEI Number: 59-2765584

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MACKEY, ANN R
C/O MEMORIAL PARK ASSOCIATION
1650-302 MARGARET STREET, #322
JACKSONVILLE, FL 32204-3869 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: ANN R MACKEY

04/27/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER AND DIRECTOR
Name MACKEY, ANN R.
Address 1650-302 MARGARET STREET, #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title PRESIDENT AND DIRECTOR
Name PATRICK, EMMET M.
Address 1650-302 MARGARET STREET, #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title DIRECTOR
Name FRAZIER, W. ROBINSON III
Address 1650-302 MARGARET STREET, #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title DIRECTOR
Name NEWTON, JOAN W.
Address 1650-302 MARGARET STREET, #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title DIRECTOR
Name ROSENBLOOM, PERCY III
Address 1650-302 MARGARET STREET, #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title DIRECTOR
Name TYLER, TIMOTHY M.
Address 1650-302 MARGARET STREET, #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title EXECUTIVE VICE PRESIDENT AND DIRECTOR
Name GETTINGER, SUNNY
Address 1650-302 MARGARET ST., #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title VICE PRESIDENT AND DIRECTOR
Name WOOD, KELLY
Address 1650-302 MARGARET ST., #322
City-State-Zip: JACKSONVILLE FL 32204-3869

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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: ANN MACKEY

TREASURER

04/27/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WINGARD, DAVID
Address 1650-302 MARGARET ST., #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title DIRECTOR
Name PAGANUCCI, CHERYL
Address 1650-302 MARGARET ST., #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title DIRECTOR
Name SHANNON, WILLIAM
Address 1650-302 MARGARET ST., #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title DIRECTOR
Name GERMANY, JOHN
Address 1650-302 MARGARET ST., #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title DIRECTOR
Name BICKETT, MATT
Address 1650-302 MARGARET ST., #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title SECRETARY AND DIRECTOR
Name DAME, BROOKS
Address 1650-302 MARGARET ST., #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title DIRECTOR
Name QUACKENBUSH, KATIE
Address 1650-302 MARGARET ST., #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title DIRECTOR
Name JOLLY, CHANDLER
Address 1650-302 MARGARET ST., #322
City-State-Zip: JACKSONVILLE FL 32204-3869

Title DIRECTOR
Name BELL, CHASITY
Address 1650-302 MARGARET ST., #322
City-State-Zip: JACKSONVILLE FL 32204-3869