

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 743680

**Entity Name:** TRAILWOOD HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**10349TRAILWOOD CT  
JUPITER, FL 33478**Current Mailing Address:**10349 TRAILWOOD CT  
JUPITER, FL 33478 US**FEI Number: 59-2158444****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LAVOLD, KATHLEEN  
10349 TRAILWOOD CT  
JUPITER, FL 33478 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:** KATHLEENLAVOLD

01/23/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**Title            PRESIDENT  
Name            LAVOLD, KATHLEEN  
Address        10349 TRAILWOOD CT  
City-State-Zip: JUPITER FL 33478Title            DIRECTOR  
Name            BOLT, JASON  
Address        10442 TRAILWOOD CIRCLE  
City-State-Zip: JUPITER FL 33478Title            TREASURER, DIRECTOR  
Name            AXELBAND, HANNAH  
Address        10409 TRAILWOOD CIRCLE  
City-State-Zip: JUPITER FL 33478Title            DIRECTOR  
Name            BRAUN, FLORETTE  
Address        10370 TRAILWOOD CIR  
City-State-Zip: JUPITER FL 33478Title            DIRECTOR  
Name            GLYNN, COLLEEN  
Address        10371 TRAILWOOD CIR  
City-State-Zip: JUPITER FL 33478Title            DIRECTOR, SECRETARY  
Name            TOMASZEWSKI, SHARON  
Address        10455 TRAILWOOD CIR  
City-State-Zip: JUPITER FL 33478

*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:** KATHLEENLAVOLD**PRESIDENT**

01/23/2024

Electronic Signature of Signing Officer/Director Detail

Date