2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746931

Entity Name: MOULTRIE TRAILS HOMEOWNERS ASSOCIATION, INC.

FILED Apr 30, 2025 Secretary of State 3230379068CC

Current Principal Place of Business:

3942 A1A SOUTH

SAINT AUGUSTINE, FL 32080

Current Mailing Address:

3942 A1A SOUTH

SAINT AUGUSTINE. FL 32080 US

FEI Number: 59-2528333 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLIGOOD, JUDY 3942 A1A SOUTH

SAINT AUGUSTINE, FL 32080 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: JUDY ALLIGOOD 04/30/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title VP Title PRESIDENT

Name WARRING, JACK Name TURRENTINE, MILLIE
Address 3942 A1A SOUTH Address 3942 A1A SOUTH

City-State-Zip: SAINT AUGUSTINE FL 32080 City-State-Zip: SAINT AUGUSTINE FL 32080

TitleTREASURERTitleDIRECTORNameGREATOREX, MONICANameWOOD, DAVIDAddress3942 A1A SOUTHAddress3942 A1A SOUTH

City-State-Zip: SAINT AUGUSTINE FL 32080 City-State-Zip: SAINT AUGUSTINE FL 32080

Title SECRETARY Title MANAGER

NameSNOW, JENNIFERNameALLIGOOD, JUDYAddress3942 A1A SOUTHAddress3942 A1A SOUTH

City-State-Zip: SAINT AUGUSTINE FL 32080 City-State-Zip: SAINT AUGUSTINE FL 32080

TitleDIRECTORTitleDIRECTORNameLIS, ROBERTNameFISHER, ALEXAddress3942 A1A SAddress3942 A1A S

City-State-Zip: ST. AUGUSTINE FL 32080 City-State-Zip: ST. AUGUSTINE FL 32080

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: JUDY ALLIGOOD MANAGER 04/30/2025