2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748748

Entity Name: SOUTH FLORIDA TRAIL RIDERS, INC.

Current Principal Place of Business:

25700 SW 212 AVENUE HOMESTEAD, FL 33031

Current Mailing Address:

P.O. BOX 924946

PRINCETON, FL 33092 US

FEI Number: 59-1911388 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIXON, SHARON Q 150 W FLAGLER **SUITE 2200** MIAMI, FL 33130 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Apr 19, 2022

Secretary of State

5616511673CC

Officer/Director Detail:

PRESIDENT VΡ Title Title

Name MALDONADO, MICHAEL Name PEREZ. PATRICIA Address 25700 SW 212 AVE Address P.O. BOX 924946

City-State-Zip: PRINCETON FL 33092 City-State-Zip: HOMESTEAD FL 33031

Title DIRECTOR Title **TREASURER**

Name GEORGE, JR., BONNY Name DIXON, SHARON QUINN

Address P.O. BOX 924946 Address 150 W. FLAGLER STREET

SUITE 2200 City-State-Zip: PRINCETON FL 33092 City-State-Zip: MIAMI FL 33130

Title DIRECTOR Title DIRECTOR

CABALLERO, EDDY Name RUIZ-GONZALEZ, BARBARA Name Address P.O. BOX 924946

Address P.O. BOX 924946 City-State-Zip: PRINCETON FL 33092 PRINCETON FL 33092

Title DIRECTOR

Title **DIRECTOR** Name REYNOLDS, RENEE Name VALDERON, LUIS Address P.O. BOX 924946

P.O. BOX 924946 Address PRINCETON FL 33092 City-State-Zip:

City-State-Zip: PRINCETON FL 33092

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: SHARON QUINN DIXON

TREASURER

04/19/2022