

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006129

Entity Name: GATOR TRACE CONDOMINIUM ASSOCIATION I, INC.**Current Principal Place of Business:**4240 GATOR TRACE AVE
APT E
FT. PIERCE, FL 34982**Current Mailing Address:**4240 GATOR TRACE AVE
APT E
FT. PIERCE, FL 34982 US**FEI Number:** 65-0028163**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BONAN, ELIZABETH ESQ
789 SW FEDERAL HWY
SUITE 101
STUART, FL 34994 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:** ELIZABETH BONAN

04/08/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title AT-LARGE
Name LOEHR, JOY
Address 4235 GATOR TRACE AVE APT F
City-State-Zip: FT. PIERCE FL 34982

Title AT-LARGE
Name HUGHES, LANTIE
Address 4348 GATOR TRACE CIR
City-State-Zip: FORT PIERCE FL 34982

Title AT-LARGE
Name BYRUM, JERRY
Address 4240 GATOR TRACE AVE
APT C
City-State-Zip: FT. PIERCE FL 34982

Title SECRETARY
Name LYLE, SUSAN
Address 4260 GATOR TRACE AVENUE
APT. D
City-State-Zip: FORT PIERCE FL 34982

Title PRESIDENT, TREASURER
Name QUATE, SUE
Address 4240 GATOR TRACE AVENUE
APT. E
City-State-Zip: FORT PIERCE FL 34982

Title AT-LARGE
Name SILVERSTEIN, ROBERT
Address 4210 GATOR TRACE AVE
APT H
City-State-Zip: FORT PIERCE FL 34982

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: SUE QUATE

PRESIDENT

04/08/2023

Electronic Signature of Signing Officer/Director Detail

Date