

2019 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 SOUTH 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

03/22/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title	AT-LARGE
Name	HUGHES, LANTIE
Address	4133 GATOR TRACE ROAD
City-State-Zip:	FORT PIERCE FL 34982

Title	AT-LARGE
Name	BYRUM, JILL
Address	1101 HERON AVE.
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	GUIDE, DARLENE
Address	4220 GATOR TRACE AVE APT D
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

03/22/2019

Electronic Signature of Signing Officer/Director Detail

Date