

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000005718

**Entity Name:** TRAIL RIDGE MASTER DRAINAGE ASSOCIATION, INC.

**Current Principal Place of Business:**

8900 KEYSTONE CROSSING SUITE 1200  
GATEWAY SHOPPES II  
INDIANAPOLIS, IN 46240

**Current Mailing Address:**

11145 TAMIAMI TRAIL EAST  
NAPLES, FL 34113 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KOULOHERAS, NICHOLAS  
11145 TAMIAMI TRAIL EAST  
NAPLES, FL 34113 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name KOULOHERAS, NICHOLAS  
Address 11145 TAMIAMI TRAIL EAST  
City-State-Zip: NAPLES FL 34113

Title D  
Name STRAUSS, ERIC  
Address 2001 SE 10TH STREET  
City-State-Zip: BENTONVILLE AR 72716

Title D  
Name WARSTLER, ROBERT  
Address 4525 E 82ND STREET  
City-State-Zip: INDIANAPOLIS IN 46250

*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:** NICHOLAS KOULOHERAS

D

04/02/2019

Electronic Signature of Signing Officer/Director Detail

Date