

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10654

FILED
Feb 22, 2020
Secretary of State
2414819806CC

Entity Name: GATOR TRACE MASTER PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4302 GATOR TRACE DR
FT. PIERCE, FL 34982

Current Mailing Address:

4302 GATOR TRACE DR
FT. PIERCE, FL 34982 US

FEI Number: 59-2648475

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BONAN, ELIZABETH ESQ.
789 SW FEDERAL HWY
STE 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, ESQ.

02/22/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CREYAUFMILLER, FRANK
Address 4320 GATOR TRACE CIR
City-State-Zip: FT. PIERCE FL 34982

Title SECRETARY
Name HARPER, SALLY
Address 4190 GATOR GREENS WAY
 PH3
City-State-Zip: FORT PIERCE FL 34982

Title DIRECTOR-AT-LARGE
Name MOUNTZ, TOMM
Address 4083 GATOR TRACE RD
City-State-Zip: FORT PIERCE FL 34982

Title VP
Name HUGHES, LANTIE
Address 4133 GATOR TRACE RD
City-State-Zip: FORT PIERCE FL 34982

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

Title DIRECTOR-AT-LARGE
Name ANDREW, RYAN
Address 1042 SE 14TH ST
City-State-Zip: STUART FL 34996

Title DIRECTOR-AT-LARGE
Name TARR, STEVEN
Address 4521 PGA BLVD
 SUITE 201
City-State-Zip: PALM BEACH GARDENS FL 33418

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

TREASURER

02/22/2020

Electronic Signature of Signing Officer/Director Detail

Date