2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10654

Entity Name: GATOR TRACE MASTER PROPERTY OWNERS ASSOCIATION,

INC.

Apr 02, 2024 **Secretary of State** 9652564016CC

FILED

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. 819 SW FEDERAL HWY STE 302 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. 04/02/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title SECRETARY Title DIRECTOR-AT-LARGE Name COLBURN, JOAN Name MOUNTZ, TOMM

4179 GATOR TRACE VILLAS CT APT A 4083 GATOR TRACE RD Address Address

City-State-Zip: FORT PIERCE FL 34982

City-State-Zip: FORT PIERCE FL 34982

Title **TREASURER** Title Name QUATE, SUE

Name HUGHES, LANTIE Address

4240 GATOR TRACE AVE APT E 4133 GATOR TRACE RD Address FORT PIERCE FL 34982

City-State-Zip: FORT PIERCE FL 34982 City-State-Zip:

Title **PRESIDENT** Title **DIRECTOR-AT-LARGE** Name TARR, STEVEN ANDREW, RYAN Name Address 4521 PGA BLVD

1042 SE 14TH ST Address SUITE 201

City-State-Zip: PALM BEACH GARDENS FL 33418 City-State-Zip: STUART FL 34996

Title AT-LARGE

Name CRESWELL, ROBERT Address 4079 GATOR TRACE RD 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 **TREASURER** 04/02/2024