

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000010849

**Entity Name:** GRAHAM SWAMP TRAIL CREW, INC.

**Current Principal Place of Business:**

75 UTAH PLACE  
PALM COAST, FL 32164

**Current Mailing Address:**

75 UTAH PLACE  
PALM COAST, FL 32164 US

**FEI Number: 46-4912386**

**Certificate of Status Desired: No**

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

MCKINNON, JR., NOAH CESQ.  
595 W. GRANADA BLVD., SUITE A  
ORMOND BEACH, FL 32174 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 P  
Name GARRETT, MICKEY  
Address 704 E RIVER OAK DR  
City-State-Zip: ORMOND BEACH FL 32174

Title V  
Name DIAMOND, DOUG  
Address 172 WOODHAVEN CIRCLE E  
City-State-Zip: ORMOND BEACH FL 32174

Title TREASURER  
Name MENG, CARRIE  
Address 75 UTAH PLACE  
City-State-Zip: PALM COAST FL 32164

Title SECRETARY  
Name MENG, CARRIE  
Address 75 UTAH PLACE  
City-State-Zip: PALM COAST FL 32164

Title PROJECT LEADER  
Name DIAMOND, CORY  
Address 172 WOODLAND CIRCLE E  
City-State-Zip: ORMOND BEACH FL 32174

Title PROJECT LEADER  
Name JEFFREY, MCNAUGHTON  
Address 24 BECKNER LANE  
City-State-Zip: PALM COAST FL 32137

Title PROJECT LEADER  
Name ROSE, PETE  
Address 75 UTAH PLACE  
City-State-Zip: PALM COAST FL 32164

*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: CARRIE MENG**

**SECRETARY**

**02/23/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date