#### 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000001313

Entity Name: CRAWFORDVILLE TRACE HOMEOWNERS ASSOCIATION, INC.

FILED Mar 02, 2018 Secretary of State CC0732463208

# **Current Principal Place of Business:**

4415 ANASTASIA COURT TALLAHASSEE, FL 32305

## **Current Mailing Address:**

4415 ANASTASIA COURT TALLAHASSEE. FL 32305 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

COLEY, GEORGIA M 4415 ANASTASIA CT. TALLAHASSEE, FL 32305 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 Title VP

NameCOLEY, GEORGIANameJACKSON, BRENDAAddress4415 ANASTASIA CT.Address4424 ANASTASIA CT.

City-State-Zip: TALLAHASSEE FL 32305 City-State-Zip: TALLAHASSEE FL 32305

Title T Title S

Name COLEMAN, FASHONDIA Name THOMAS, BYRON

Address 4422 ANASTASIA CT. Address 4428 ANASTASIA COURT
City-State-Zip: TALLAHASSEE FL 32305 City-State-Zip: TALLAHASSEE FL 32305

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.

Electronic Signature of Signing Officer/Director Detail