

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006460

Entity Name: TRAILS END HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3384 LOST CANYON PLACE
COCOA, FL 32926-7414

Current Mailing Address:

P O BOX 236473
COCOA, FL 32923-6473 US

FEI Number: 59-3190014

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DRAVES, MILTON R
3384 LOST CANYON PL.
COCOA, FL 32926 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 DIRECTOR
Name MOSBY, JOHN
Address 3376 ROCKY GAP PL
City-State-Zip: COCOA FL 32926

Title T
Name DRAVES, MILTON
Address 3384 LOST CANYON PL.
City-State-Zip: COCOA FL 32926

Title D
Name SOLDATO, CATHY
Address 3292 ECHO RIDGE PL
City-State-Zip: COCOA FL 32926

Title D
Name DUVALL, DEBRA
Address 3385 LOST CANYON PL
City-State-Zip: COCOA FL 32926

Title DIRECTOR
Name CLARK, JUSTIN
Address 3434 LOST CANYON PL
City-State-Zip: COCOA FL 32926

Title SECRETARY, DIRECTOR
Name QUICK, KALA
Address 3331 CRAGGY BLUFF PL
City-State-Zip: COCOA FL 32926

Title PRESIDENT, DIRECTOR
Name OBERLE, KENT
Address 3291 CRAGGY BLUFF PL
City-State-Zip: COCOA FL 32926

Title DIRECTOR
Name STILLEY, MARK
Address 3401 CRAGGY BLUFF PL
City-State-Zip: COCOA FL 32926

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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: MILTON R. DRAVES

TREASURER

02/22/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WHITE, SHELBY
Address 3374 LOST CANYON PL
City-State-Zip: COCOA FL 32926

Title DIRECTOR, VP
Name CERVI , MICHELLE
Address 3241 CRAGGY BLUFF PL
City-State-Zip: COCOA FL 32926

Title DIRECTOR
Name KIRK, NATHANIEL
Address 3341 CRAGGY BLUFF PL
City-State-Zip: COCOA FL 32926

Title DIRECTOR
Name KERNER, CASSY
Address 3280 CRAGGY BLUFF PL
City-State-Zip: COCOA FL 32926