

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15344

**Entity Name:** OLD TRAIL HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 28, 2017**  
**Secretary of State**  
**CC3735496496**

**Current Principal Place of Business:**

11621 KEW GARDENS AVENUE  
SUITE 200  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

11621 KEW GARDENS AVENUE  
SUITE 200  
PALM BEACH GARDENS, FL 33410 US

**FEI Number: 59-2717786**

**Certificate of Status Desired: No**

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

LAW OFFICE OF GARY FIELDS, PA  
4440 PGA BLVD  
SUITE 308  
PBG , FL 33410 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: GARY FIELDS**

**04/28/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name CROTTY, KLYE MARIE  
Address 11621 KEW GARDENS AVENUE  
SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title T  
Name DIGIRLAMO, KAREN  
Address 11621 KEW GARDENS AVENUE  
SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title S  
Name CROTTY, TIMOTHY  
Address 11621 KEW GARDENS AVENUE  
SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title D  
Name SCHMIDT , WARREN  
Address 11621 KEW GARDENS AVENUE  
SUITE 200  
City-State-Zip: PALM BEACH GARDENS FL 33410

*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: KLYE MARIE CROTTY**

**PRESIDENT**

**04/28/2017**

Electronic Signature of Signing Officer/Director Detail

Date