

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000001313

Entity Name: CRAWFORDVILLE TRACE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**5032 CAPITAL CIRCLE S.W., SUITE 2, PMB #174
TALLAHASSEE, FL 32305-7886**Current Mailing Address:**5032 CAPITAL CIRCLE S.W., SUITE 2, PMB #174
TALLAHASSEE, FL 32305-7886 US**FEI Number:** 81-5295878**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SCORSONE, TYRONE
926 CRAWFORDVILLE TRACE
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:** TYRONE SCORSONE

01/18/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	COLEMAN, FASHONDIA
Address	4422 ANASTASIA CT.
City-State-Zip:	TALLAHASSEE FL 32305

Title	SECRETARY
Name	RUTHERFORD, MICHAEL J SR.
Address	949 CRAWFORDVILLE TRACE
City-State-Zip:	TALLAHASSEE FL 32305

Title	PRESIDENT
Name	SCORSONE, TYRONE
Address	926 CRAWFORDVILLE TRACE
City-State-Zip:	TALLAHASSEE FL 32305

Title	VP
Name	RUTHERFORD, MICHAEL J SR.
Address	949 CRAWFORDVILLE TRACE
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.

SIGNATURE: MICHAEL J. RUTHERFORD SRVICE
PRESIDENT/SECRETARY

01/18/2021

Electronic Signature of Signing Officer/Director Detail

Date