2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2021
Secretary of State
4005403673CC

DOCUMENT# N28692

Entity Name: THE TRAILS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3550 BUSCHWOOD PARK DR.
STE 150
TAMPA, FL 33618

Current Mailing Address:

C/O ASSOCIA GULF COAST
3550 BUSCHWOOD PARK DR. STE 150
TAMPA, FL 33618 US

FEI Number: 65-0193324

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIA GULF COAST, INC
3550 BUSCHWOOD PARK DR.
STE 150
TAMPA, FL 33618 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: JOHN HENSLEY 04/24/2021

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT	Title	VP
Name	TRUST, ANTOINETTE SIJATZ	Name	SLICIS, TIMOTHY & MELINDA
Address	C/O ASSOCIA GULF COAST 3550 BUSCHWOOD PARK DR. STE 150	Address	C/O ASSOCIA GULF COAST 3550 BUSCHWOOD PARK DR. STE 150
City-State-Zip:	TAMPA FL 33618	City-State-Zip:	TAMPA FL 33618
Title	TREASURER	Title	SECRETARY
Name	HEUGTEN, SUSAN VAN	Name	HENNINGSEN, MARJORIE
Address	C/O ASSOCIA GULF COAST 3550 BUSCHWOOD PARK DR. STE 150	Address	C/O ASSOCIA GULF COAST 3550 BUSCHWOOD PARK DR. STE 150
City-State-Zip:	TAMPA FL 33618	City-State-Zip:	TAMPA FL 33618
Title	DIRECTOR		
Name	IPPOLITO, MARY		
Address	C/O ASSOCIA GULF COAST 3550 BUSCHWOOD PARK DR. STE 150		
City-State-Zip:	TAMPA FL 33618		

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: ANTOINETTE TRUST PRESIDENT 04/24/2021

Electronic Signature of Signing Officer/Director Detail — Date