2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2015
Secretary of State
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Entity Name: THE GARDEN VILLAS AT GATOR TRACE OF ST. LUCIE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

4072 GATORTRACE ROAD
FORT PIERCE, FL 34982

Current Mailing Address:

4072 GATORTRACE ROAD
FORT PIERCE, FL 34982 US

FEI Number: 65-0191725

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLBURN, JOAN A
4072 GATORTRACE ROAD
FORT PIERCE, FL 34982 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	TRES
Name	MOORMAN, ROBIN
Address	4066 GATOR TRACE RD.
City-State-Zip:	FORT PIERCE FL 34982

Title	AT
Name	HINDULAK, AGNES
Address	4042 GATOR TRACE ROAD
City-State-Zip:	FORT PIERCE FL 34982

Title	PRES
Name	COLBURN, JOAN
Address	4072 GATOR TRACE RD
City-State-Zip:	FORT PIERCE FL 34982

Title	OTHER
Name	LENNON, JAMES
Address	4062 GARDEN VILLAS CT
City-State-Zip:	FORT PIERCE FL 34982

Title	S
Name	MICAL, AGNES
Address	4067 GARDEN VILLAS CT
City-State-Zip:	FORT PIERCE FL 34982

Title	VP
Name	MINKLER-QUINN, BERYL S
Address	4067 GARDEN VILLAS CT
City-State-Zip:	FORT PIERCE FL 34982

Title	AT
Name	HUGHES, CAROL
Address	4037 GATOR TRACE ROAD
City-State-Zip:	FORT PIERCE FL 34982

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: ROBIN MOORMAN TREASURER 01/11/2015

Electronic Signature of Signing Officer/Director Detail — Date