

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000007850

Entity Name: SPANISH TRAIL SCOUT RESERVATION ALUMNI ASSOCIATION
INCORPORATED**FILED**
Jul 20, 2023
Secretary of State
2039478183CC**Current Principal Place of Business:**315 PAT COVELL ROAD
DEFUNIAK SPRINGS, FL 32435**Current Mailing Address:**315 PAT COVELL ROAD
DEFUNIAK SPRINGS, FL 32435 US**FEI Number: 83-1349077****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SOMERS, JACOB R
954 PERDIDO ROAD
CANTONMENT, FL 32533 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 PRESIDENT

Name SOMERS, JACOB R

Address 954 PERDIDO ROAD

City-State-Zip: CANTONMENT FL 32533

Title DIRECTOR OF SERVICE

Name GARY, THOMAS

Address 8309 NEVADA STREET

City-State-Zip: NAVARRE FL 32566

Title DIRECTOR OF ADMIN

Name ELLIFF, REBECCA

Address 954 PERDIDO ROAD

City-State-Zip: CANTONMENT FL 32533

Title CAMP DIRECTOR

Name SAMS, CHRIS

Address 315 PAT COVELL RD

City-State-Zip: DEFUNIAK SPRINGS FL 32435

Title TREASURER

Name ODOM, JAMES

Address 315 PAT COVELL ROAD

City-State-Zip: DEFUNIAK FL 32435

Title DIRECTOR OF PROGRAM

Name WALLACE, JAMES

Address 5120 BLUE SPRINGS COVE

City-State-Zip: BAKER FL 32531

Title DIRECTOR OF MEMBERSHIP

Name JOHNSON, JAIME

Address 5515 HIGHWAY 393

City-State-Zip: CRESTVIEW FL 32539

Title VP

Name PELFREY, CHRIS

Address 44 8TH STREET

City-State-Zip: SHALIMAR FL 32579

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: JACOB SOMERS**PRESIDENT****07/20/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date