2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Mar 10, 2006 8:00 am **Secretary of State DOCUMENT #728514** 03-10-2006 90004 024 ****61.25 QUAIL RUN OF SUNRISE UNIT ONE ASSOCIATION. INC. Principal Place of Business Mailing Address 7502 N.W. 30TH PLACE 7502 N.W. 30TH PLACE APT. 414 301 APT. 414 301 SUNRISE, FL 33313 SUNRISE, FL 33313 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03032006 CR2E037 (11/05) Applied For City & State City & State 4. FEI Numbe 59-1593034 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LEVIN, CHERYL J Street Address (P.O. Box Number is Not Acceptable) **COURTYARD BUSINESS CENTER 4694 NW 103RD AVENUE** SUNRISE, FL 33351-7970 Zip Code City 8. 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. I am familiar with, and accept Levin DATE (NOTE: Registered Agent signature required when reinstating) Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be П Florida Department of State Due by May 1, 2006 Trust Fund Contribution Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change ☐ Addition TITLE Delete TITLE NAME INFANTINO, MARILYN JONATHAM H.LEVINE STREET ADDRESS 7502 N.W. 30TH PLACE, 414 STREET ADDRESS 7500 HW 30TH PLACE 422 SUNRISE, FL 33313 CITY-ST-ZIP CITY-ST-ZIP SUNTIFE, FLUTIVA 33313 Ciuliani Barbara 7500 N.W 30 4 Pl 301 TITLE ☐ Delete TITLE ☐ Addition GINTIANI: BARBARA NAME NAME STREET ADDRESS 7500 NW 30TH PLACE, 301 STREET ADDRESS Sunrise F. 33313 CITY-ST-ZIP SUNRISE, FL 33313 CITY-ST-ZIP O Pelligrino, Debbie Achange 7500 NW 30 Apl #114 Sunrise, Fl. 33313 O Wilson, Dorothy Achange 7500 NW 30 Apl #315 Sunrise, Fl 33313 Ð TITLE **Delete** TITLE INFANTINO, NICHOLAS NAME NAME 7502 N.W. 30TH PLACE, APT. 220 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SUNRISE, FL 33313 CITY-ST-ZIP TITLE ☐ Addition 🔀 Delete CROUSTEIN, MALODY NAME NAME 4031 NW 93 WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33351 CITY-ST-ZIP D Lamonaco, Joyce & Change ☐ Addition TITLE 🗷 Delete 7500 H.W 30 4 Pl # 315 CANOVA, MARGUERITE NAME NAME STREET ADDRESS 7500 N.W. 30TH PLACE, 303 STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CHY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE NAME

SIGNATURE:

SUNRISE, FL 33313

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

> Jonathan \sim α

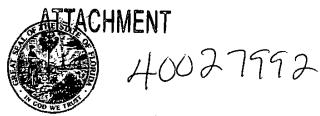
☐ Delete

SUNRISE,

FILED

☐ Addition

333/3



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 1, 2006

QUAIL RUN OF SUNRISE #1, INC. C/O ACCOUNTSULT, LLC 8211 W BROWARD BLVD, STE 430 PLANTATION, FL. 33324

Upon receipt of your letter and/or check(s) totaling \$61.25, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner Senior Section Administrator

Letter Number: 006A00014334