


**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 25, 2003 8:00 am
Secretary of State

03-25-2003 90065 011 ****70.00

DOCUMENT # 761248
1. Entity Name
QUAIL RUN CONDOMINIUM ASSOCIATION OF HILLSBOROUGH COUNTY, INC.



Principal Place of Business
**4131 GUNN HIGHWAY
TAMPA FL 33624**

Mailing Address
**4131 GUNN HIGHWAY
TAMPA FL 33624**

2. Principal Place of Business
16105 N. FLORIDA AVE
Suite, Apt. #, etc.
SUITE A
City & State
LUTZ, FL

3. Mailing Address
16105 N FLORIDA AVE
Suite, Apt. #, etc.
SUITE A
City & State
LUTZ, FL

Zip
33549-6161 Country
US

Zip
33549-6161 Country
US



CHECK HERE IF MAKING CHANGES

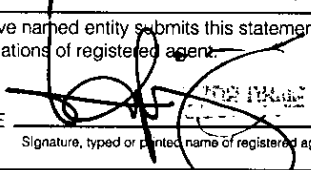
4. FEI Number **59-2249644** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**GREENACRE PROPERTIES INC
4131 GUNN HWY
TAMPA FL 33624**

7. Name and Address of New Registered Agent
Name **WILLIAM C. SPIVEY**
Street Address (P.O. Box Number is Not Acceptable)
16105 N. FLORIDA AVE, SUITE A
City **LUTZ** FL Zip Code **33549**

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 the obligations of registered agent.

SIGNATURE  **WILLIAM C. SPIVEY** DATE **2/20/03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

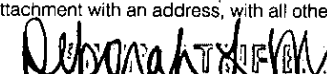
10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	JOHNSON, DIANNA	
STREET ADDRESS	15210 POND WOODS DRIVE W	
CITY-ST-ZIP	TAMPA FL 33618	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	CRAPARO, JEAN	
STREET ADDRESS	15224 POND WOODS DRIVE W	
CITY-ST-ZIP	TAMPA FL 33618	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	FOTOPOULOUS, LEIGH	
STREET ADDRESS	15304 POND WOODS DRIVE E	
CITY-ST-ZIP	TAMPA FL 33618	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LAS KOWSKI, MARK	
STREET ADDRESS	15306 POND WOODS DRIVE W	
CITY-ST-ZIP	TAMPA FL 33618	
TITLE	TSD	<input checked="" type="checkbox"/> Delete
NAME	OLIVA, SHIRLEY	
STREET ADDRESS	15235 POND WOODS DRIVE W	
CITY-ST-ZIP	TAMPA FL 33618	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BOTT, ALANA	
STREET ADDRESS	15234 POND WOODS DRIVE E	
CITY-ST-ZIP	TAMPA FL 33618	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	Change	<input checked="" type="checkbox"/> Addition
NAME	Miranda, Debbie		
STREET ADDRESS	15207 Shaker Court		
CITY-ST-ZIP	Tampa, FL 33618		
TITLE	VPD	Change	<input checked="" type="checkbox"/> Addition
NAME	McMahon, John		
STREET ADDRESS	15404 Pond Woods Drive East		
CITY-ST-ZIP	Tampa, FL 33618		
TITLE	SD	Change	<input checked="" type="checkbox"/> Addition
NAME	Cunningham, Bill		
STREET ADDRESS	15412 Pond Woods Drive West		
CITY-ST-ZIP	Tampa, FL 33618		
TITLE	TD	Change	<input checked="" type="checkbox"/> Addition
NAME	Slocum, Randee		
STREET ADDRESS	15236 Pond Woods Drive East		
CITY-ST-ZIP	Tampa, FL 33618		
TITLE	D	Change	<input checked="" type="checkbox"/> Addition
NAME	Paige, Les		
STREET ADDRESS	15229 Pond Woods Drive West		
CITY-ST-ZIP	Tampa, FL 33618		
TITLE	D	Change	<input checked="" type="checkbox"/> Addition
NAME	Pidwinski, Lawrence		
STREET ADDRESS	15222 Pond Woods Drive East		
CITY-ST-ZIP	Tampa, FL 33618		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:  **DEBORAH MIRANDA** DATE **2/20/03**

CR2E037 (10/02)