


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008 08:00 AM
Secretary of State

DOCUMENT # 764266
 1. Entity Name
QUIET OAKS HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business 64 MISTY MEADOW LN MULBERRY, FL 33860	Mailing Address P.O. BOX 5301 LAKELAND, FL 33807
---	--

DO NOT WRITE IN THIS SPACE



04202008 No Chg-NP CR2E037 (4/06)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
--	-------------------------------

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

6. Name and Address of Current Registered Agent
 LIGHTSEY, BARRY B
 64 MISTY MEADOW LN
 MULBERRY, FL 33860

DO NOT WRITE IN THIS SPACE

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

Filing Fee is \$81.25 Due by May 1, 2008

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CROSS, ASONJA 725 N. LORRI AVE LAKELAND, FL 33815
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LIGHTSEY, BARRY 64 MISTY MEADOW LN MULBERRY, FL 33860
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LIGHTSEY, ALFREDIA 64 MISTY MEADOW LN MULBERRY, FL 33860
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIGHTSEY, COREY 3520 CLEVELAND HEIGHT BLVD #108 LAKELAND, FL 33803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000933476
 05/22/08-80096-010 61.25
 U00000933476
 05/22/08-80096-011 8.75
DO NOT WRITE IN THIS SPACE

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.

SIGNATURE: Barry B. Lightsey **BARRY B. LIGHTSEY** 4-20-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #