2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2009
Secretary of State

DOCUMENT# 768379

Entity Name: QUAIL MEADOW HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O JAKAB MANAGEMENT
666 NE DIXIE HWY
JENSEN BEACH, FL 34957 US

New Principal Place of Business:

Current Mailing Address:

C/O JAKAB MANAGEMENT
P.O. BOX 111
JENSEN BEACH, FL 34958 US

New Mailing Address:

FEI Number: 59-2290112 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BONAN, ELIZABETH P ESQ
759 S FEDERAL HWY STE 212
STUART, FL 34994 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: ST ( ) Delete
Name: CASS, NORMA
Address: 3664 D SW QUAIL MEADOW TRAIL
City-St-Zip: PALM CITY, FL 34990

Title: VD ( ) Delete
Name: BOCKMAN-PEDERSEN, ERIK
Address: 3585 C SW QUAIL MEADOW TRAIL
City-St-Zip: PALM CITY, FL 34990

Title: PD ( ) Delete
Name: FARQUHAR, NANCY
Address: 37847 SW QUAIL MEADOW TRAIL
City-St-Zip: PALM CITY, FL 34990

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition
Name: CARLO, LINDA
Address: 3584A SW QUAIL MEADOW TRAIL
City-St-Zip: PALM CITY, FL 34990 US

Title: PD (X) Change ( ) Addition
Name: BOCKMAN-PEDERSEN, ERIK
Address: 3585C SW QUAIL MEADOW TRAIL
City-St-Zip: PALM CITY, FL 34990 US

Title: VPD (X) Change ( ) Addition
Name: FARQUHAR, NANCY
Address: 3784F SW QUAIL MEADOW TRAIL
City-St-Zip: PALM CITY, FL 34990 US

Title: SD ( ) Change (X) Addition
Name: BARNES, MARYLOU
Address: 3705A SW QUAIL MEADOW TRAIL
City-St-Zip: PALM CITY, FL 34990 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LINDA CARLO TD 05/27/2009
Electronic Signature of Signing Officer or Director — Date