

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002820

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** QUAIL OAKS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

142 QUAIL OAKS CIRCLE  
GROVELAND, FL 34736 US

**New Principal Place of Business:**

**Current Mailing Address:**

142 QUAIL OAKS CIRCLE  
GROVELAND, FL 34736 US

**New Mailing Address:**

PO BOX 886  
GROVELAND, FL 34736 US

FEI Number: 03-0463194

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRET JONES, P.A.  
700 ALMOND STREET  
CLERMONT, FL 34711 US

**Name and Address of New Registered Agent:**

QUAIL OAKS  
001 QUAIL OAKS CIRCLE  
GROVELAND, FL 34736 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: QUAIL OAKS HOMEOWNERS ASSOCIATION

04/26/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: ROBERTS, ADAM  
Address: 158 QUAIL OAKS CIR  
City-St-Zip: GROVELAND, FL 34736

Title: P  
Name: GANDY, CHARLES  
Address: 113 QUAIL OAKS CIRCLE  
City-St-Zip: GROVELAND, FL 34736

Title: T  
Name: HOLLAND, JIM  
Address: 154 QUAIL OAKS CIRCLE  
City-St-Zip: GROVELAND, FL 34736

Title: S  
Name: KULASZEWSKI, DANAE  
Address: 142 QUAIL OAKS CIRCLE  
City-St-Zip: GROVELAND, FL 34736

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: DANAE KULASZEWSKI

S

04/26/2012

Electronic Signature of Signing Officer or Director

Date