2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004363

FILED Mar 08, 2010 Secretary of State

Entity Name: QUAIL HOLLOW SOCIAL CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

2051 PIONEER TRAIL #32

NEW SMYRNA BEACH, FL 32168

Current Mailing Address: New Mailing Address:

2051 PIONEER TRAIL #32

NEW SMYRNA BEACH, FL 32168

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

WITTIBSLAGER, PATRICIA 2051 PIONEER TRAIL #32

NEW SMYRNA BEACH, FL 32168 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP

Name: MOONEY, BARBARA
Address: 2051 PIONEER TRAIL #27
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: DV

 Name:
 THEBERGE, LORETTE

 Address:
 2051 PIONEER TRAIL #105

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32168

Title: DS

Name: HENDERSON, MARGARET
Address: 2051 PIONEER TRAIL #59
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title:

Name: WAYNE, MARY

Address: 2051 PIONEER TRAIL #10
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title:

 Name:
 TIERSON, MYRTLE

 Address:
 2051 PIONEER TRAIL #57

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32168

Title: [

Name: SMAILA, JOE

Address: 2051 PIONEER TRAIL #24
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: PATRICIA WITTIBSLAGER TREA 03/08/2010