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Jan 22 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N14855 (3)

1. Corporation Name

QUAIL RUN HOMEOWNERS' ASSOCIATION OF CITRUS COUNTY, INC.



Principal Place of Business

Mailing Address

%GEORGE L PATTERSON
7981 TENTH AVENUE SOUTH
ST. PETERSBURG FL 33707

%GEORGE L. PATTERSON
7981 TENTH AVENUE SOUTH
ST. PETERSBURG FL 33707-2703

3. Date Incorporated or Qualified
05/09/1986

3a. Date of Last Report
01/25/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number
59-2805081

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PATTERSON, GEORGE L.
7981 TENTH AVENUE SOUTH
ST. PETERSBURG FL 33707

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
NAME PATTERSON, GEORGE L.
STREET ADDRESS 7981 TENTH AVENUE SOUTH
CITY-ST-ZIP ST. PETERSBURG FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD DELETE
NAME PICKLE, HERBERT E.
STREET ADDRESS 5850 S.W. 45TH STREET
CITY-ST-ZIP FT. LAUDERDALE FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE STD DELETE
NAME FRASER, LEWIS L.
STREET ADDRESS 6300 26TH AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D DELETE
NAME MAXINE PERKINS
STREET ADDRESS 1360 E. SILVERTHORN LP.
CITY-ST-ZIP HOLDEN FL

4.1 TITLE Change Addition
4.2 NAME RICHARD PERRINS
4.3 STREET ADDRESS 1360 E. SILVERTHORN LP
4.4 CITY-ST-ZIP HERNANDO, FL

TITLE D DELETE
NAME ROHLE, BRUNO
STREET ADDRESS 1211 E SILBER THORN LP
CITY-ST-ZIP HOLDER FL

5.1 TITLE Change Addition
5.2 NAME PETER ASSETTA
5.3 STREET ADDRESS 1230 E. SILVERTHORN LP
5.4 CITY-ST-ZIP HERNANDO, FL

TITLE DELETE
NAME GEORGE L. PATTERSON
STREET ADDRESS P.O. Box 47025
CITY-ST-ZIP St. Petersburg, FL 33743-7025

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS 300002065599
6.4 CITY-ST-ZIP -01/23/97--01010--017
***61.25

14. I do hereby certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on any attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0050386

CR2E037 (9/96)

1/10/97 813/345-3145