

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30362

FILED  
Feb 24, 2012  
Secretary of State

**Entity Name:** QUAIL RIDGE ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O QUALIFIED PROPERTY MGMT INC  
5901 US HWY 19, STE 7Q  
NEW PORT RICHEY, FL 34652

**New Principal Place of Business:**

QUALIFIED PROPERTY MANAGEMENT, INC  
5901 US HWY 19, STE 7Q  
NEW PORT RICHEY, FL 34652 US

**Current Mailing Address:**

C/O QUALIFIED PROPERTY MGMT INC  
5901 US HWY 19, STE 7Q  
NEW PORT RICHEY, FL 34652

**New Mailing Address:**

QUALIFIED PROPERTY MANAGEMENT, INC  
5901 US HWY 19, STE 7Q  
NEW PORT RICHEY, FL 34652 US

**FEI Number:** 59-3019682

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

QUALIFIED PROPERTY MANAGEMENT, INC.  
5901 US HIGHWAY 19  
7Q  
NEW PORT RICHEY, FL 34652 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: PRES  
Name: CASTRO, CARLA  
Address: 5901 US HWY 19, STE 7Q  
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: SEC  
Name: ENGEL, ANDREA  
Address: 5901 US 19, STE 7Q  
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: TREA  
Name: WITTY, DAN  
Address: 5901 US HWY 19, STE 7Q  
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: D  
Name: LANIER, ANN  
Address: 5901 US HWY 19, STE 7Q  
City-St-Zip: NEW PORT RICHEY, FL 34652 US

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: CARLA CASTRO

PRES

02/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date