

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 758944

**Entity Name:** QUAIL CREEK PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4886 POND APPLE DRIVE  
NAPLES, FL 34119**Current Mailing Address:**4886 POND APPLE DRIVE  
NAPLES, FL 34119 US**FEI Number:** 59-2152193**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STECKENRIDER, BRIAN W.  
4886 POND APPLE DRIVE  
NAPLES, FL 34119 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:** BRIAN W. STECKENRIDER

04/08/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name CAVUOTO, DOMINICK  
Address 4888 POND APPLE DRIVE N  
City-State-Zip: NAPLES FL 34119

Title PRESIDENT  
Name TAIBI, CLAIRE  
Address 13102 BALD CYPRESS LANE  
City-State-Zip: NAPLES FL 34119

Title TREASURER  
Name BADEN, RONALD  
Address 13002 BALD CYPRESS LANE  
City-State-Zip: NAPLES FL 34119

Title ASST. SECRETARY  
Name STECKENRIDER, BRIAN W.  
Address 4886 POND APPLE DR. S  
City-State-Zip: NAPLES FL 34119

Title SECRETARY  
Name BALLATORE, FRANK  
Address 4323 POND APPLE DRIVE S  
City-State-Zip: NAPLES FL 34119

Title DIRECTOR  
Name BECKER, TODD  
Address 13223 POND APPLE DRIVE E  
City-State-Zip: NAPLES FL 34119

*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:** BRIAN W. STECKENRIDER

ASST. SECRETARY

04/08/2024

Electronic Signature of Signing Officer/Director Detail

Date