

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768379

Entity Name: QUAIL MEADOW HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O C & M PROPERTY MANAGEMENT
215 S FED HWY SUITE 200
STUART, FL 34994

Current Mailing Address:

C/O C & M PROPERTY MANAGEMENT
P.O. BOX 111
JENSEN BEACH, FL 34958 US

FEI Number: 59-2290112

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSS EARLE & BONAN, P.A.
789 S FEDERAL HWY STE 101
STUART, FL 34994 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

Officer/Director Detail :

Title TREASURER, DIRECTOR
Name CARLO, LINDA
Address 3584A SW QUAIL MEADOW TRAIL
City-State-Zip: PALM CITY FL 34990

Title VP, DIRECTOR
Name MAGGI, ARNOLD
Address 3545-B SW QUAIL MEADOW TRAIL
City-State-Zip: PALM CITY FL 34990

Title SECRETARY, DIRECTOR
Name PLASTOW, JAMES
Address 3744-B SW QUAIL MEADOW TR.
City-State-Zip: PALM CITY FL 34990

Title PRESIDENT, DIRECTOR
Name WALSH, JOHN
Address 3785-B SW QUAIL MEADOW TR.
City-State-Zip: PALM CITY FL 34990

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: JOHN WALSH

PRESIDENT

03/27/2019

Electronic Signature of Signing Officer/Director Detail

Date