

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768379

Entity Name: QUAIL MEADOW HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O JAKAB MANAGEMENT
666 NE DIXIE HWY
JENSEN BEACH, FL 34957

Current Mailing Address:

C/O JAKAB 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 PTD
Name CARLO, LINDA
Address 3584A SW QUAIL MEADOW TRAIL
City-State-Zip: PALM CITY FL 34990

Title DIRECTOR
Name CHATENKA, AARON
Address 3545 F SW QUAIL MEADOW TRAIL
City-State-Zip: PALM CITY FL 34990

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

Title DIRECTOR
Name BOCKMAN-PEDERSEN, ERIK
Address 3585C SW QUAIL MEADOW TRAIL
City-State-Zip: PALM CITY FL 34990

Title SD
Name BARNES, MARYLOU
Address 3705A SW QUAIL MEADOW TRAIL
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: LINDA CARLO

TREASURER

03/31/2014

Electronic Signature of Signing Officer/Director Detail

_____ Date