above, or on an attachment with all other like empowered. 03/25/2020 SIGNATURE: JOHN WALSH PRESIDENT, DIRECTOR

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

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail :

	Title	TREASURER, DIRECTOR	Title	VP, DIRECTOR
	Name	CARLO, LINDA	Name	MAGGI, ARNOLD
	Address	3584A SW QUAIL MEADOW TRAIL	Address	3545-B SW QUAIL MEADOW TRAIL
	City-State-Zip:	PALM CITY FL 34990	City-State-Zip:	PALM CITY FL 34990
	Title	SECRETARY, DIRECTOR	Title	PRESIDENT, DIRECTOR
		SEGRETART, DIRECTOR	Theo	- ,
	Name	PLASTOW, JAMES	Name	WALSH, JOHN
		,		,
	Name	PLASTOW, JAMES	Name	WALSH, JOHN

ROSS EARLE & BONAN, P.A.

P.O. BOX 111 JENSEN BEACH, FL 34958 US

FEI Number: 59-2290112

Name and Address of Current Registered Agent:

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

DOCUMENT# 768379

Entity Name: QUAIL MEADOW HOMEOWNERS ASSOCIATION, INC.

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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

FILED Mar 25, 2020 Secretary of State 3431315553CC

Certificate of Status Desired: No

Date

Date