2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03632

Entity Name: QUAIL CREEK VILLAGE FOUNDATION, INC.

FILED
Mar 07, 2016
Secretary of State
CC9634117715

Date

Current Principal Place of Business:

11655 QUAIL VILLAGE WAY NAPLES. FL 34119

Current Mailing Address:

11655 QUAIL VILLAGE WAY NAPLES, FL 34119 US

FEI Number: 59-2779289 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAMOUCE, ROBERT C 5405 PARK CENTRAL COURT NAPLES, FL 34109 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 Title DIRECTOR

Name KOHER, ELLEN Name MEEUWSEN, DANIEL

Address 10335 QUAIL CROWN DRIVE Address 10380 QUAIL CROWN DRIVE

City-State-Zip: NAPLES FL 34119 City-State-Zip: NAPLES FL 34119

Title SECRETARY Title VP

Electronic Signature of Signing Officer/Director Detail

Name AUGER, PAUL Name NELSON, JOHN

Address 11416 QUAIL VILLAGE WAY Address 10345 QUAIL CROWN DRIVE

City-State-Zip: NAPLES FL 34119 City-State-Zip: NAPLES FL 34119

Title DIRECTOR Title PRESIDENT

Name HEALY, MICHELLE Name ACCORSINI, FRANCIS (CHIP)

Address 10376 QUAIL COWN DRIVE Address 10395 QUAIL CROWN DRIVE

City-State-Zip: NAPLES FL 34119 City-State-Zip: NAPLES FL 34119

Title DIRECTOR

Name HOPEWOOD, BARBARA
Address 11708 QUAIL VILLAGE WAY

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: ELLEN KOHER TREASURER 03/07/2016