

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 698407

FILED  
Mar 14, 2011  
Secretary of State

**Entity Name:** QUAIL RIDGE DEVELOPERS, INC.

**Current Principal Place of Business:**

125 N. DAVIS LANE #11  
DEFUNIAK SPGS, FL 32433 US

**New Principal Place of Business:**

128 TWIN TREES DRIVE  
DEFUNIAK SPGS, FL 32433 US

**Current Mailing Address:**

P O BOX 1584  
DEFUNIAK SPRINGS, FL 32435 US

**New Mailing Address:**

**FEI Number:** 59-2113683      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCCORMICK, LISA  
125 N. DAVIS LANE #11  
DE FUNIAK SPRGS, FL 32433 US

**Name and Address of New Registered Agent:**

MCCORMICK, LISA  
128 TWIN TREES DRIVE  
DE FUNIAK SPRGS, FL 32433 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

03/14/2011

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MCCORMICK, GERALD D  
Address: 432 TEELINVILLE DR  
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

Title: DS  
Name: MCCORMICK, FRANKIE L  
Address: 6000 CO. HWY 278  
City-St-Zip: DEFUNIAK SPRINGS, FL

Title: VP  
Name: MCCORMICK, LISA S  
Address: 432 TEELINVILLE DR  
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LISA S. MCCORMICK

VP

03/14/2011

Electronic Signature of Signing Officer or Director

Date