

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729729

FILED  
Apr 20, 2009  
Secretary of State

**Entity Name:** QUAIL HOLLOW HOMEOWNERS ASSOCIATION OF WINTER PARK, INC.

**Current Principal Place of Business:**

2180 TURKEY RUN  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

2180 TURKEY RUN  
WINTER PARK, FL 32789

**New Mailing Address:**

**FEI Number:** 23-7368893

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COONEY, RICHARD  
2180 TURKEY RUN  
WINTER PARK, FL 32789 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WILLIAMS, FRANCEE  
Address: 2163 TURKEY RUN  
City-St-Zip: WINTER PARK, FL 32789

Title: VP ( ) Delete  
Name: LAYSON, HEATHER  
Address: 424 TURKEY RUN  
City-St-Zip: WINTER PARK, FL 32789

Title: S ( ) Delete  
Name: VANN, ASHLEY  
Address: 333 BRIARWOOD  
City-St-Zip: WINTER PARK, FL 32789

Title: T ( ) Delete  
Name: GILLIAM, MARION  
Address: 2147 TURKEY RUN  
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete  
Name: COONEY, RICHARD P  
Address: 2180 TURKEY RUN  
City-St-Zip: WINTER PARK, FL 32789

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: CORNETT, KIM  
Address: 313 TURKEY RUN  
City-St-Zip: WINTER PARK, FL 32789

Title: VP (X) Change ( ) Addition  
Name: JOHN, MUCCIGROSSO  
Address: 2216 MALLARD CIRCLE  
City-St-Zip: WINTER PARK, FL 32789

Title: S (X) Change ( ) Addition  
Name: VANN, ASHLEY  
Address: 333 BRIARWOOD DRIVE  
City-St-Zip: WINTER PARK, FL 32789

Title: T (X) Change ( ) Addition  
Name: JOHNSON, TOM  
Address: 322 TURKEY RUN  
City-St-Zip: WINTER PARK, FL 32789

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD COONEY

D

04/20/2009

Electronic Signature of Signing Officer or Director

Date