

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736362

FILED
Mar 14, 2006
Secretary of State

Entity Name: QUAIL HOLLOW CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2134 SHERWOOD FOREST BLVD.
WEST PALM BEACH, FL 33415

New Principal Place of Business:

Current Mailing Address:

2134 SHERWOOD FOREST BLVD.
WEST PALM BEACH, FL 33415

New Mailing Address:

FEI Number: 59-1696167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHAEL GELFAND, P.A.
ONE CLEARLAKE CENTRE #1010
250 AUSTRALIAN AVE SOUTH
WEST PALM BEACH, FL 33401 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: ARCE, JORGE A
Address: 2148 SHERWOOD FOREST BLVD, # 4
City-St-Zip: W. PALM BEACH, FL 33415

Title: T () Delete
Name: WILSON, DON R
Address: 2124 SHERWOOD FOREST BLVD
City-St-Zip: W. PALM BEACH, FL 33415

Title: S () Delete
Name: HAMMOND, MARIA
Address: 2130 SHERWOOD FOREST BLVD #16
City-St-Zip: W. PALM BEACH, FL 33415

Title: VP () Delete
Name: MALVAEAUX, JUDITH
Address: 2120 SHERWOOD FOREST BLVD, UNIT 50
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: FERREIRA, MELANIE
Address: 2124 SHERWOOD FOREST BLVD #34
City-St-Zip: W. PALM BEACH, FL 33415

Title: S (X) Change () Addition
Name: FERREIRA, MELANIE
Address: 2124 SHERWOOD FOREST BLVD #34
City-St-Zip: W. PALM BEACH, FL 33415

Title: VP (X) Change () Addition
Name: RUSSELL, FRED JR
Address: 2106 SHERWOOD FOREST BLVD, #18
City-St-Zip: WEST PALM BEACH, FL 33415

I hereby certify that the information supplied with this filing does not qualify for the 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: JORGE A. ARCE

P

03/14/2006

Electronic Signature of Signing Officer or Director

Date