2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#736362

FILED Jan 31, 2007 Secretary of State

Entity Name: QUAIL HOLLOW CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2134 SHERWOOD FOREST BLVD. WEST PALM BEACH, FL 33415

Current Mailing Address: New Mailing Address:

2134 SHERWOOD FOREST BLVD. WEST PALM BEACH, FL 33415

FEI Number: 59-1696167 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MICHAEL GELFAND, P.A.

ONE CLEARLAKE CENTRE #1010
250 AUSTRALIAN AVE SOUTH
WEST PALM BEACH, FL 33401 US

MICHAEL GELFAND, P.A.
1555 PALM BEACH LAKES BLVD
SUITE 1220
WEST PALM BEACH, FL 33401 US

MICHAEL GELFAND, P.A.
1555 PALM BEACH LAKES BLVD
SUITE 1220
WEST PALM BEACH, FL 33401 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: 01/31/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: ARCE, JORGE A Name: YEARY, JAMES

Address: 2148 SHERWOOD FOREST BLVD, # 4 Address: 2120 SHERWOOD FOREST BLVD, # 31

City-St-Zip: W. PALM BEACH, FL 33415 City-St-Zip: W. PALM BEACH, FL 33415

Title: T () Delete Title: () Change () Addition

 Name:
 FERREIRA, MELANIE
 Name:

 Address:
 2124 SHERWOOD FOREST BLVD #34
 Address:

 City-St-Zip:
 W. PALM BEACH, FL 33415
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 FERREIRA, MELANIE
 Name:

 Address:
 2124 SHERWOOD FOREST BLVD #34
 Address:

 City-St-Zip:
 W. PALM BEACH, FL 33415
 City-St-Zip:

Title: VP (X) Delete Title: () Change () Addition

 Name:
 RUSSELL, FRED JR
 Name:

 Address:
 2106 SHERWOOD FOREST BLVD, #18
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33415
 City-St-Zip:

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: MELANIE FERREIRA T 01/31/2007