

FILED
Mar 11, 2003 8:00 am
Secretary of State

02-07-2003 90086 018 ***61.25

**2003 NOT-FOR-PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

2/7

DOCUMENT # 736362
 1. Entity Name
QUAIL HOLLOW CONDOMINIUM ASSOCIATION, INC.



55015576

Principal Place of Business
**2134 SHERWOOD FOREST BLVD.
 WEST PALM BEACH FL 33415**

Mailing Address
**2134 SHERWOOD FOREST BLVD.
 WEST PALM BEACH FL 33415**

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1686167** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**MICHAEL GELFAND, P.A.
 ONE CLEARLAKE CENTRE #1010
 250 AUSTRALIAN AVE SOUTH
 WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
 FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

FILE NOW: FEE IS \$61.25
Division of Corporations

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEDYGELSKI, FRANK <i>President</i> <input type="checkbox"/> Delete 2148 SHERWOOD FOREST BLVD. #3 WEST PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POUENO, JV <i>Vice Pres.</i> <input type="checkbox"/> Delete 2144 SHERWOOD FOREST BLVD. W. PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUE, AHLMAN <i>Sec. Retiring</i> <input type="checkbox"/> Delete 2148 SHERWOOD FOREST BLVD. #2 W. PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUENO, MARINA <i>Treasurer</i> <input type="checkbox"/> Delete 2144 SHERWOOD FOREST BLVD. #7 W. PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, DON <i>ALTERNATE</i> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Sedygelski, Frank <i>President</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition BUENO, JV - VICE PRESIDENT 2144 SHERWOOD FOREST BLVD #7 WPB FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition AHLMAN, SUE 2148 SHERWOOD FOREST BLVD #28 WPB FL 33415 <i>SECRETARY</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition BUENO, MARINA Treasurer <i>Treasurer</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition WILSON, DON 2124 SHERWOOD FOREST BLVD #34 WPB FL 33415 <i>alternate</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>info added.</i>

Director
 Director
 Director
 Director
 Director

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *FRANK SEDYGELSKI* REGISTERED *ScygelSKI* President 1-31-03 5619646615
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

All 5 are DIRECTORS