2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# 751482

Entity Name: QUAIL HOLLOW OF BOCA WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

778 S MILITARY TR
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

RESIDENTIAL MGMT. CONCEPTS
P.O. BOX 97-0069
BOCA RATON, FL 334970069

New Mailing Address:

FEI Number: 59-2060363 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PALOMBI, GARY
778 S MILITARY TRAIL
DEERFIELD BEACH, FL 33442 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:	PD	( ) Delete
Name:	BERKOWITZ, MARK	
Address:	19741 BOCA WEST DR. 4132	
City-St-Zip:	BOCA RATON, FL 33434	
Title:	V	( ) Delete
Name:	WEINSTEIN, ROSALIND	
Address:	19703 BOCA WEST DR.	
City-St-Zip:	BOCA RATON, FL 33434	
Title:	T	( ) Delete
Name:	SPERBER, JERRY	
Address:	19755 BOCA W DR	
City-St-Zip:	BOCA RATON, FL 33434	
Title:	D	(X) Delete
Name:	KALODNEY, PHILLIP	
Address:	19795 BOCA WEST DR	
City-St-Zip:	BOCA RATON, FL 33434	
Title:	S	( ) Delete
Name:	FLANZ, LEONARD	
Address:	19681 BOCA WEST DR	
City-St-Zip:	BOCA RATON, FL 33434	
Title:	V	( ) Delete
Name:	ROSEN, SAUL	
Address:	19729 BOCA WEST DR	
City-St-Zip:	BOCA RATON, FL 33434	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: GARY PALOMBI RA 04/14/2009

Electronic Signature of Signing Officer or Director — Date