2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Apr 03, 2012 **DOCUMENT# 755591** Secretary of State

Entity Name: CALAIS VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

1301 SEMINOLE BLVD.

SUITE 110 LARGO, FL 33770

SUITE 110

LARGO, FL 33770

QUALIFIED PROPERTY MANAGEMENT, INC.

5901 US HWY. 19, SUITE 7Q

NEW PORT RICHEY, FL 34652 US

New Mailing Address: **Current Mailing Address:**

QUALIFIED PROPERTY MANAGEMENT, INC. 1301 SEMINOLE BLVD.

5901 US HWY. 19, SUITE 7Q

NEW PORT RICHEY, FL 34652 US

FEI Number: 59-2020909 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

US

Name and Address of New Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS, INC QUALIFIED PROPERTY MANAGEMENT, INC 4585 140TH AVE N 5901 US HWY, 19

SUITE 7Q

SUITE 1012

CLEARWATER, FL 33762 US NEW PORT RICHEY, FL 34652 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: MARY A. WHITE 04/03/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

PRES O'HERN, TINA Name:

5901 US HWY. 19, SUITE 7Q Address: City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title:

Name: UHRINEK, TARA

Address: 5901 US HWY, 19, SUITE 7Q City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: **TREA**

SIMPSON, WILLIAM Name: Address: 5901 US HWY. 19, SUITE 7Q City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: SEC

Name: SCHULTHESS, JANE Address: 5901 US HWY. 19, SUITE 7Q City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: DIR

Name: KINNEY, JASON

5901 US HWY. 19, SUITE 7Q Address: NEW PORT RICHEY, FL 34652 US City-St-Zip:

I hereby 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 all other like empowered.

PRES SIGNATURE: TINA O'HERN 04/03/2012