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Mar 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **765590** (5)
1. Corporation Name
QUAIL RUN GOLF CLUB, INC.

Principal Place of Business #1 FOREST LAKES BLVD. NAPLES FL 33942	Mailing Address #1 FOREST LAKES BLVD. NAPLES FL 33942
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3. Date Incorporated or Qualified
10/28/1982

4. FEI Number 59-2199546	Applied For <input type="checkbox"/> Not Applicable
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 34105	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 34150
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MONAHAN, GEORGE F.
6588 ILEX CIRCLE
WLDEN OAKS
NAPLES FL 33942**

81 Name James H. Smith
82 Street Address (P.O. Box Number is Not Acceptable) 106 Quail Forest Blvd.
83
84 City Naples
85 Zip Code FL 34105

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE James H. Smith **James H. Smith** **3/13/98**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE PD	<input checked="" type="checkbox"/> DELETE
NAME MONAHAN, JR. GEORGE F.	
STREET ADDRESS 6588 ILEX CIRCLE	
CITY-ST-ZIP NAPLES FL	
TITLE VPD	<input checked="" type="checkbox"/> DELETE
NAME SMITH, JAMES H	
STREET ADDRESS 106 QUAIL FOREST BLVD	
CITY-ST-ZIP NAPLES FL	
TITLE SD	<input type="checkbox"/> DELETE
NAME POIRIER, MARJORIE	
STREET ADDRESS 316 WOODSHIRE LANE, #A10	
CITY-ST-ZIP NAPLES FL	
TITLE T	<input type="checkbox"/> DELETE
NAME HON, EDWARD G.	
STREET ADDRESS 168 KIRTKAND	
CITY-ST-ZIP NAPLES FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME James H. Smith	
1.3 STREET ADDRESS 106 Quail Forest Blvd.	
1.4 CITY-ST-ZIP Naples, FL 34105	
2.1 TITLE VP/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME Elizabeth Burns	
2.3 STREET ADDRESS 5964 Pelican Bay Blvd. #432	
2.4 CITY-ST-ZIP Naples, FL 34108	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James H. Smith **James H. Smith, Pres** **3/13/98** **941-261-2198**

CR2E037 (10/97)