

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90114 002 ***158.75

DOCUMENT # J02794

1. Entity Name

QUAIL CREEK DEVELOPMENTS CORPORATION, INC.



Principal Place of Business

5672 STRAND CT
SUITE 1
NAPLES FL 34110
US

Mailing Address

5672 STRAND CT
SUITE 1
NAPLES FL 34110
US

2. Principal Place of Business

801 ANCHOR RODE DRIVE #106
NAPLES, FL 34103

3. Mailing Address

801 ANCHOR RODE DRIVE #106
NAPLES, FL 34103

City & State

City & State

Zip

Country

USA

Zip

Country

USA

4. FEI Number

65-0267913

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fees Required

6. Name and Address of Current Registered Agent

KELLY, JANET
5672 STRAND CT
SUITE #1
NAPLES FL 34110

7. Name and Address of New Registered Agent

Name

Kelly, Janet

Street Address (P.O. Box Number is Not Acceptable)

801 Anchor Rode Drive # 106

City

Naples

FL

Zip Code

34103

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

[Signature]

Janet Kelly, Treasurer

4/29/05

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	ST	<input type="checkbox"/> Delete
NAME	KELLY, JANET	
STREET ADDRESS	5672 STRAND CT #1	
CITY-ST-ZIP	NAPLES FL 34110	
TITLE	PD	<input type="checkbox"/> Delete
NAME	HARDY, ROBERT S.	
STREET ADDRESS	5672 STRAND COURT, STE. 1	
CITY-ST-ZIP	NAPLES FL 34110	
TITLE	VD	<input type="checkbox"/> Delete
NAME	HARDY, ROBERT PAUL	
STREET ADDRESS	5672 STRAND COURT, STE. 1	
CITY-ST-ZIP	NAPLES FL 34110	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kelly, Janet	
STREET ADDRESS	801 Anchor Rode Drive #106	
CITY-ST-ZIP	Naples FL 34103	
TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hardy, Robert S.	
STREET ADDRESS	5659 Strand Court #101	
CITY-ST-ZIP	Naples FL 34110	
TITLE	VP/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hardy, Robert Paul	
STREET ADDRESS	5659 Strand Court #101	
CITY-ST-ZIP	Naples FL 34110	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 607, 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:

[Signature] Janet Kelly, Treasurer

4/29/05 (239)4349895

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #