

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 23, 2005**  
**Secretary of State**

DOCUMENT# N01000003734

Entity Name: QUAIL ROOST HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

11525 HIGHWAY 710  
OKEECHOBEE, FL 34974

**New Principal Place of Business:**

**Current Mailing Address:**

11525 HIGHWAY 710  
OKEECHOBEE, FL 34974

**New Mailing Address:**

FEI Number: 51-0467811      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ENRICO, ROBERT S  
11525 HIGHWAY 710  
OKEECHOBEE, FL 34974      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: ENRICO, ROBERT S  
Address: 11525 HIGHWAY 710  
City-St-Zip: OKEECHOBEE, FL 34974

Title: D      ( ) Delete  
Name: ENRICO, HILDA M  
Address: 11525 HIGHWAY 710  
City-St-Zip: OKEECHOBEE, FL 34974

Title: TD      ( ) Delete  
Name: WHITEHEAD, WILLIAM D  
Address: 12250 SE 65TH LANE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: SD      ( ) Delete  
Name: WHITEHEAD, BARBARA J  
Address: 12250 SE 65TH LANE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: VD      ( ) Delete  
Name: CORNELIUS, DAVID T  
Address: 6001 SE 128TH STREET  
City-St-Zip: OKEECHOBEE, FL 34974

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT ENRICO

PD

01/23/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date