

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01239

FILED
Apr 22, 2011
Secretary of State

Entity Name: QUAIL VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3521 QUAIL TR
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

3521 QUAIL TR
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 59-2865758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEESEBERG, SCOTT H
3529 SPARROW LANE
MELBOURNE, FL 32935 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
Name: MCKINNEY, WILLIAM
Address: 3527 SPARROW LANE
City-St-Zip: MELBOURNE, FL 32935

Title: VPD
Name: GOSS, RUSSELL
Address: 1850 QUAIL TRAIL
City-St-Zip: MELBOURNE, FL 32935

Title: TRD
Name: DELORIA, LOUISE
Address: 1826 QUAIL TRAIL
City-St-Zip: MELBOURNE, FL 32935

Title: SD
Name: MADDEN, JOAN E
Address: 1858 QUAIL TRAIL
City-St-Zip: MELBOURNE, FL 32935

Title: D
Name: DELORIA, WILLIAM
Address: 1826 QUAIL TRAIL
City-St-Zip: MELBOURNE, FL 32935

Title: D
Name: DEMAAYER, FRANCOIS
Address: 1788 QUAIL TRAIL
City-St-Zip: MELBOURNE, FL 32935

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.

SIGNATURE: WILLIAM MCKINNEY

P

04/22/2011

Electronic Signature of Signing Officer or Director

Date