

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002820

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: QUAIL OAKS HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

105 QUAIL OAKS CIRCLE  
GROVELAND, FL 34736 US

## New Principal Place of Business:

142 QUAIL OAKS CIRCLE  
GROVELAND, FL 34736 US

## Current Mailing Address:

105 QUAIL OAKS CIRCLE  
GROVELAND, FL 34736 US

## New Mailing Address:

142 QUAIL OAKS CIRCLE  
GROVELAND, FL 34736 US

FEI Number: 03-0463194

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JONES, BRET  
700 ALMOND ST  
CLERMONT, FL 34711 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: VP ( ) Delete  
Name: LANGER, CHARLES  
Address: 105 QUAIL OAKS CIR  
City-St-Zip: GROVELAND, FL 34736

Title: PS ( ) Delete  
Name: P'CCONER, STACEY  
Address: 102 QUAIL OAKS CIRCLE  
City-St-Zip: GROVELAND, FL 34736

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: ROBERTS, AMANDA  
Address: 158 QUAIL OAKS CIR  
City-St-Zip: GROVELAND, FL 34736

Title: PS (X) Change ( ) Addition  
Name: KING, DONALD  
Address: 114 QUAIL OAKS CIRCLE  
City-St-Zip: GROVELAND, FL 34736

Title: TRES ( ) Change (X) Addition  
Name: NUSEN, NANCY  
Address: 157 QUAIL OAKS CIRCLE  
City-St-Zip: GROVELAND, FL 34736

Title: SEC ( ) Change (X) Addition  
Name: KULASZEWSKI, DANAE  
Address: 142 QUAIL OAKS CIRCLE  
City-St-Zip: GROVELAND, FL 34736

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DANAE KULASZEWSKI

SEC

04/24/2009

Electronic Signature of Signing Officer or Director

Date