# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 21, 2006**
**Secretary of State**

DOCUMENT# N02000003637

**Entity Name:** QUAIL VALLEY CHARITIES, INC.

**Current Principal Place of Business:**

6545 PINNACLE DRIVE
VERO BEACH, FL 32967

**New Principal Place of Business:**

**Current Mailing Address:**

2345 HIGHWAY A1A
VERO BEACH, FL 32963

**New Mailing Address:**

**FEI Number: 47-0866975** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

ALEXANDER, LARRY B ESQ.
505 SOUTH FLAGLER DRIVE
SUITE 1100
WEST PALM BEACH, FL 33401 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: VD ( ) Delete
Name: GIVEN, KEVIN
Address: 2345 HIGHWAY A1A
City-St-Zip: VERO BEACH, FL 32963

Title: PTD ( ) Delete
Name: MULVEY, STEPHEN W
Address: 2345 HIGHWAY A1A
City-St-Zip: VERO BEACH, FL 32963

Title: SD ( ) Delete
Name: REDNER, MARTHA
Address: 2345 HIGHWAY A1A
City-St-Zip: VERO BEACH, FL 32963

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN L. BARTL MS. 01/21/2006

Electronic Signature of Signing Officer or Director — Date