

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006533

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** QUAIL HOLLOW TOWNHOMES OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1016 AIRPORT RD  
UNIT #4  
DESTIN, FL 32541

**New Principal Place of Business:**

1150 AIRPORT RD  
UNIT 172  
DESTIN, FL 32541

**Current Mailing Address:**

1016 AIRPORT RD  
UNIT #4  
DESTIN, FL 32541

**New Mailing Address:**

1150 AIRPORT RD  
UNIT #172  
DESTIN, FL 32541

**FEI Number:** 41-2178754      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MONSEES, JAMES D  
1150 AIRPORT RD  
UNIT 172  
DESTIN, FL 32541 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: D ( ) Delete  
Name: MONSEES, JAMES D  
Address: 1150 AIRPORT RD UNIT 172  
City-St-Zip: DESTIN, FL 32541

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAMES MONSEES

D

05/01/2008

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

\_\_\_\_\_  
Date