

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005739

FILED  
Apr 09, 2009  
Secretary of State

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

**Current Principal Place of Business:**

1014 AIRPORT RD  
DESTIN, FL 32541

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2613  
FORT WALTON BEACH, FL 32549

**New Mailing Address:**

**FEI Number:** 41-2207219

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FOWNER, DEBORAH J  
29-C MIRACLE STRIP PKWY SW  
FORT WALTON BEACH, FL 32548 US

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

RDF ASSOCIATES, INC.  
29-C MIRACLE STRIP PKWY SW  
FORT WALTON BEACH, FL 32548 US

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: DEBBIE FOWNER

04/09/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: TANNER, CANDANCE  
Address: 1014 AIRPORT RD UNIT 145  
City-St-Zip: DESTIN, FL 32541

Title: VP ( ) Delete  
Name: VETETO, THOMAS R  
Address: 321 BREAM AVE UNIT 610  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: S/T ( ) Delete  
Name: ARNOLD, BRANDON  
Address: 1014 AIRPORT AVE UNIT 175  
City-St-Zip: DESTIN, FL 32541

Title: D ( ) Delete  
Name: TATUM, LESLIE  
Address: 1014 AIRPORT RD UNIT 169  
City-St-Zip: DESTIN, FL 32541

Title: D ( ) Delete  
Name: WORK, SCOTT  
Address: 1014 AIRPORT RD UNIT 188  
City-St-Zip: DESTIN, FL 32541

**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 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: DEBBIE FOWNER

MGR

04/09/2009

Electronic Signature of Signing Officer or Director

Date