

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 26, 2004  
Secretary of State**

DOCUMENT# N09939

Entity Name: QUAIL ROOST RECREATION ASSOCIATION, INC.

**Current Principal Place of Business:**

PO BOX 10579  
NAPLES, FL 34101 US

**New Principal Place of Business:**

GROSBEAK & COVEY LANE  
NAPLES, FL 34113 US

**Current Mailing Address:**

PO BOX 10579  
NAPLES, FL 34101 US

**New Mailing Address:**

FEI Number: 65-0087851      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HART, STEPHEN P  
4985 EAST TRAMIAMI TRAIL  
NAPLES, FL 34113 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: CHRISTENSEN, BETY  
Address: 23 GROSHEAK LANE  
City-St-Zip: NAPLES, FL 34114

Title: DP ( ) Delete  
Name: GAGLIANO, JOAN  
Address: 56 GROSBEAK LANE  
City-St-Zip: NAPLES, FL 34113

Title: VDS ( ) Delete  
Name: BIRD, REBECCA  
Address: 27 GROSBEAK LANE  
City-St-Zip: NAPLES, FL 34113

Title: DT ( ) Delete  
Name: CHRISTENSEN, BETTY  
Address: 23 GROSBEAK LANE  
City-St-Zip: NAPLES, FL 34114

Title: D ( ) Delete  
Name: BIRD, REBECCA  
Address: 27 GROSBEAK LANE  
City-St-Zip: NAPLES, FL 34113

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

Title: TD (X) Change ( ) Addition  
Name: CHRISTENSEN, BETTY  
Address: 23 GROSHEAK LANE  
City-St-Zip: NAPLES, FL 34114

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

Title: VSD (X) Change ( ) Addition  
Name: MUINA, LOURDES  
Address: GROSBEAK LANE  
City-St-Zip: NAPLES, FL 34113

Title: SD (X) Change ( ) Addition  
Name: GARITA, SERGIO  
Address: 12 GROSBEAK LANE  
City-St-Zip: NAPLES, FL 34114

Title: D (X) Change ( ) Addition  
Name: THROPE, STEPHEN  
Address: 15 GROSBEAK LANE  
City-St-Zip: NAPLES, FL 34113

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOANN GAGLIANO

PD

04/26/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date