

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17029

FILED  
Mar 06, 2009  
Secretary of State

Entity Name: QUAIL POINT OF SUNTREE, INC.

**Current Principal Place of Business:**

617 MIMOSA COURT  
MELBOURNE, FL 32940

**New Principal Place of Business:**

**Current Mailing Address:**

617 MIMOSA COURT  
MELBOURNE, FL 32940

**New Mailing Address:**

FEI Number: 59-2766631

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KEN HARRIS & ASSOCIATES  
526 BREVARD AVENUE  
COCOA, FL 32922 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: PD ( ) Delete  
Name: BOUDREAU, NORMAN  
Address: 811 WILLOW CRK LN  
City-St-Zip: MELBOURNE, FL 32940

Title: TD ( ) Delete  
Name: KLOBUCAR, FRANK  
Address: 822 WILLOW CRK LN  
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Delete  
Name: HARRIS, JO ANN  
Address: 834 WILLOW CREEK LANE  
City-St-Zip: MELBOURNE, FL 32940

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

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

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

Title: PD (X) Change ( ) Addition  
Name: BRUBAKER, ROGER  
Address: 821 WILLOW CRK LN  
City-St-Zip: MELBOURNE, FL 32940

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

Title: VPD (X) Change ( ) Addition  
Name: DOSDORIAN, HONORA  
Address: 825 WILLOW CREEK LANE  
City-St-Zip: MELBOURNE, FL 32940

Title: SECD ( ) Change (X) Addition  
Name: BEEBLE, PETER  
Address: 611 MIMOSA COURT  
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Change (X) Addition  
Name: WOLFE, FRED  
Address: 830 WILLOW CREEK LANE  
City-St-Zip: MELBOURNE, FL 32940

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: FRANK E. KLOBUCAR

TD

03/06/2009

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

\_\_\_\_\_  
Date