

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19575

FILED
Apr 07, 2011
Secretary of State

Entity Name: THE QUAIL RIDGE FARMS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6015 MORROW ST. E.
SUITE 107
JACKSONVILLE, FL 32217

New Principal Place of Business:

6028 CHESTER AVE
SUITE 105
JACKSONVILLE, FL 32217

Current Mailing Address:

6015 MORROW ST. E.
SUITE 107
JACKSONVILLE, FL 32217

New Mailing Address:

6028 CHESTER AVE
SUITE 105
JACKSONVILLE, FL 32217

FEI Number: 59-2794519

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BANNING MANAGEMENT INC
6015 MORROW ST., E.
SUITE 107
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

BANNING MANAGEMENT INC
6028 CHESTER AVE
SUITE 105
JACKSONVILLE, FL 32217 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: _____

04/07/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: LAROCCA, TONY
Address: 10605 QUAIL RIDGE DR
City-St-Zip: SAINT AUGUSTINE, FL 32095

Title: T
Name: JOHNSON, RON
Address: 10620 QUAIL RIDGE DR
City-St-Zip: SAINT AUGUSTINE, FL 32095

Title: D
Name: CROWELL, DONNA
Address: 10644 QUAIL RIDGE DR
City-St-Zip: PONTE VEDRA, FL 32081

I hereby 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 all other like empowered.

SIGNATURE: TONY LAROCCE

PD

04/07/2011

Electronic Signature of Signing Officer or Director

Date