

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21755

FILED
Apr 05, 2011
Secretary of State

Entity Name: QUAIL RIDGE ASSOCIATION AT SUNTREE, INC.

Current Principal Place of Business:

857 RIDGE LAKE DR.
MELBOURNE, FL 32940 US

New Principal Place of Business:

Current Mailing Address:

6939 N WICKHAM RD
MELBOURNE, FL 32940 US

New Mailing Address:

FEI Number: 59-2847622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, FRANCIS M
6939 N. WICKHAM RD.
MELBOURNE, FL 32940 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
Name: RATHBUN, GAYLE
Address: 873 RIDGE LAKE DR
City-St-Zip: MELBOURNE, FL 32940

Title: VPD
Name: THOMPSON, JACKIE
Address: 851 RIDGE LAKE DR
City-St-Zip: MELBOURNE, FL 32940

Title: TD
Name: GIRARD, CAROL A
Address: 802 RIDGE LAKE DR
City-St-Zip: MELBOURNE, FL 32940

Title: SD
Name: GRIFFIN, PATRICIA
Address: 861 RIDGE LAKE DRIVE
City-St-Zip: MELBOURNE, FL 32940

Title: D
Name: BELL, FRANK
Address: 865 RIDGE LAKE DRIVE
City-St-Zip: MELBOURNE, FL 32940

Title: D
Name: HIRST, SAM
Address: 922 RIDGE LAKE DRIVE
City-St-Zip: MELBOURNE, FL 32940

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: CAROL GIRARD

TD

04/05/2011

Electronic Signature of Signing Officer or Director

Date