


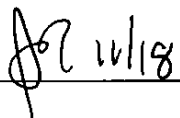



# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # N24462</b> 1. Entity Name <b>QUAIL'S NEST RESIDENTS ASSOCIATION, INC.</b>						<b>FILED</b> <b>05 NOV 17 PM 12: 09</b> SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business <b>PO BOX 110339</b> <b>NAPLES, FL 34108 US</b>				Mailing Address <b>PO BOX 110339</b> <b>NAPLES, FL 34108 US</b>			
2. Principal Place of Business <b>11875 QUAIL VILLAGE WAY</b> Suite, Apt. #, etc.		3. Mailing Address <b>11875 QUAIL VILLAGE WAY</b> Suite, Apt. #, etc.					
City & State <b>NAPLES, FL</b>		City & State <b>NAPLES, FL</b>		4. FEI Number <b>65-0112199</b>		Applied For <input type="checkbox"/> Not Applicable	
Zip <b>34119</b>		Country <b>USA</b>		Zip <b>34119</b>		Country <b>USA</b>	
6. Name and Address of Current Registered Agent <b>KUETER, BEVERLY</b> <b>C/O SUNBRUST MGMT CORP</b> <b>4306 ARNOLD AVE</b> <b>NAPLES, FL 34104</b>				7. Name and Address of New Registered Agent Name <b>ALAN RAULERSON</b> Street Address (P.O. Box Number is Not Acceptable) <b>11875 QUAIL VILLAGE WAY</b> City <b>NAPLES</b> <b>FL</b> Zip Code <b>34119</b>			
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE <b>11/8/05</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$61.25</b> <b>After January 1, 2006, Fee will be \$122.50</b>				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		Make check payable to <b>Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP HOLT, GRETCHEN 10373 QUAIL CROWN DR NAPLES, FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP PAUL HAWKINS 11762 QUAIL VILLAGE WAY NAPLES, FL 34119	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS REGAN, DOMINIC 10358 QUAIL CROWN DR NAPLES, FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GEORGE FELDMAN 10378 QUAIL CROWN DR NAPLES, FL 34119	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MEEUWSEN, SALLY 10380 QUAIL CROWN DR NAPLES, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	700061521057 11/17/05--01048--002 **61.25			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BAVIER, RONALD 10374 QUAIL CROWN DR NAPLES, FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SANDY LASCH 11740 QUAIL VILLAGE WAY NAPLES FL 34119	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				DATE <b>11/8/05</b> <small>Date Daytime Phone #</small>			