## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N39276

FILED Mar 30, 2011 Secretary of State

Entity Name: QUAIL MEADOW AT IBIS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1061 E INDIANTOWN RD 1061 E INDIANTOWN RD STE 410 STE 200

JUPITER, FL 33477 US JUPITER, FL 33477 US

Current Mailing Address: New Mailing Address:

1061 E INDIANTOWN RD STE 410 1061 E INDIANTOWN RD STE 200

JUPITER, FL 33477 US JUPITER, FL 33477 US

FEI Number: 65-0211428 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KUNKLE, CRAIG
C/O SUNRISE COMPANIES
1061 E INDIANTOWN RD STE 410
JUPITER, FL 33477 US

KUNKLE, CRAIG
C/O SUNRISE COMPANIES
1061 E INDIANTOWN RD STE 200
JUPITER, FL 33477 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: 03/30/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: LEBEN, TONI

Address: 8437 QUAIL MEADOW WAY
City-St-Zip: WEST PALM BEACH, FL 33412

Title: T

Name: CHIARELLO, ANTHONY
Address: 8356 QUAIL MEADOW WAY
City-St-Zip: WEST PALM BEACH, FL 33412

Title: VP

Name: SHAPIRO, RITA

Address: 8202 QUAIL MEADOW TRACE
City-St-Zip: WEST PALM BEACH, FL 33412

Title:

Name: GRADY, PAUL

Address: 8447 QUAIL MEADOW WAY
City-St-Zip: WEST PALM BEACH, FL 33412

Title:

Name: JONES, FRANK

Address: 8286 QUAIL MEADOW WAY
City-St-Zip: WEST PALM BEACH, FL 33412

Title: S

Name: HERSEY, MARCIA

Address: 8296 QUAIL MEADOW WAY
City-St-Zip: WEST PALM BEACH, FL 33412

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: TONI LEBEN P 03/30/2011