

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004300

FILED  
Apr 24, 2008  
Secretary of State

**Entity Name:** QUAIL LAKE AT LANSBROOK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3527 PALM HARBOR BLVD  
PALM HARBOR, FL 34683

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1418  
PALM HARBOR, FL 34682

**New Mailing Address:**

3527 PALM HARBOR BLVD  
PALM HARBOR, FL 34683

**FEI Number:** 59-3587602

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HANSON, JACK B  
MELROSE MANAGEMENT GROUP  
3527 PALM HARBOR BLVD  
PALM HARBOR, FL 34683 US

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

HANSON, JACK B  
MELROSE-SOVEREIGN COMPANIES  
3527 PALM HARBOR BLVD  
PALM HARBOR, FL 34683 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: JACK B HANSON

04/24/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GAGE, SUE  
Address: 4932 QUILL COURT  
City-St-Zip: PALM HARBOR, FL 34685

Title: VPD ( ) Delete  
Name: PATRICK, KATHY  
Address: 5049 QUILL COURT  
City-St-Zip: PALM HARBOR, FL 34685

Title: TD ( ) Delete  
Name: COE, ROGER  
Address: 5097QUILL CT  
City-St-Zip: PALM HARBOR, FL 34685

Title: D (X) Delete  
Name: WOODS, JAMES  
Address: 4918 QUILL COURT  
City-St-Zip: PALM HARBOR, FL 34685

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

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

Title: SD (X) Change ( ) Addition  
Name: PATRICK, KATHY  
Address: 5049 QUILL COURT  
City-St-Zip: PALM HARBOR, FL 34685

Title: TD (X) Change ( ) Addition  
Name: COE, ROGER  
Address: 5097 QUILL CT  
City-St-Zip: PALM HARBOR, FL 34685

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

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: SUE GAGE

P

04/24/2008

Electronic Signature of Signing Officer or Director

Date