Current Ma	iling Address:			
PO BOX 54 MERRITT IS				
FEI Number: 59-3738579			Certificate of Status Desired:	No
Name and A	Address of Current Registered Agent:			
FOWLER, BRII 25 MCLEOD S MERRITT ISLA				
The above name	d entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of Florida.	
SIGNATURI	_			
SIGNATORI	<b>_</b> :			
SIGNATURI	Electronic Signature of Registered Agent		[	Date
			C	Date
	Electronic Signature of Registered Agent	Title	VP	Date
Officer/Dire	Electronic Signature of Registered Agent	Title Name		Date
<b>Officer/Dire</b> Title	Electronic Signature of Registered Agent ctor Detail : DP		VP	Date
<b>Officer/Dire</b> Title Name	Electronic Signature of Registered Agent <b>ctor Detail :</b> DP ROSSENBERRY, DONALD 305 QUAIL DR	Name	VP MILLNER, DANIELLE 475 BUTTONWOOD DR.	Date
<b>Officer/Dire</b> Title Name Address	Electronic Signature of Registered Agent <b>ctor Detail :</b> DP ROSSENBERRY, DONALD 305 QUAIL DR	Name Address	VP MILLNER, DANIELLE 475 BUTTONWOOD DR.	Date
<b>Officer/Dire</b> Title Name Address City-State-Zip:	Electronic Signature of Registered Agent ctor Detail : DP ROSSENBERRY, DONALD 305 QUAIL DR MERRITT ISLAND FL 32953	Name Address	VP MILLNER, DANIELLE 475 BUTTONWOOD DR.	Date
Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent ctor Detail : DP ROSSENBERRY, DONALD 305 QUAIL DR MERRITT ISLAND FL 32953 ST	Name Address	VP MILLNER, DANIELLE 475 BUTTONWOOD DR.	Date

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: SUE ROSENBERRY

Electronic Signature of Signing Officer/Director Detail

## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0100005703

## Entity Name: QUAIL RUN ESTATES HOMEOWNERS ASSOCIATION, INC.

## **Current Principal Place of Business:**

305 QUAIL DRIVE MERRITT ISLAND. FL 32953

FILED Mar 01, 2013 **Secretary of State** CC2801582921

SECRETARY/TREASURER 03/01/2013

Date