

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000007680

**Entity Name:** THE QUARRY COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

10401 N. DEERWOOD PARK BLVD  
SUITE 2130  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

10401 N. DEERWOOD PARK BLVD  
SUITE 2130  
JACKSONVILLE, FL 32256

**FEI Number:** 20-1455057

**Certificate of Status Desired:** No

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

EVERGREEN LIFESTYLES MANAGEMENT  
10401 DARTINGTON DRIVE  
FT. MYERS, FL 33913 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name BROOKS, SCOTT  
Address 24311 WALDEN CENTER DR.  
STE 300  
City-State-Zip: BONITA SPRINGS FL 34134

Title VD  
Name HASTY, CHRIS  
Address 24311 WALDEN CENTER DR  
SUITE 300  
City-State-Zip: BONITA SPRINGS FL 34134

Title STD  
Name RAY, LAURA  
Address 24311 WALDEN CENTER DRIVE  
SUITE 300  
City-State-Zip: BONITA SPRINGS FL 34134

*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:** SCOTT BROOKS

PD

04/08/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date