2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2012
Secretary of State

DOCUMENT# N44185

Entity Name: LEVY COUNTY QUILT MUSEUM, INC.

Current Principal Place of Business:

11050 NW 10TH AVENUE
CHIEFLAND, FL 32626 US

New Principal Place of Business:

Current Mailing Address:

11050 NW 10TH AVENUE
CHIEFLAND, FL 32626 US

New Mailing Address:

FEI Number: 59-3164556 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HORNE, WINNELLE M
11050 NW 10TH AVENUE
CHIEFLAND, FL 32626 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: HARDEE, ANN
Address: 11050 NW 10TH AVENUE
City-St-Zip: CHIEFLAND, FL 32626 US

Title: D
Name: HORNE, WINNELLE M
Address: 11050 NW 10TH AVENUE
City-St-Zip: CHIEFLAND, FL 32626 US

Title: T
Name: PREVATT, CLEO
Address: 11050 NW 10TH AVENUE
City-St-Zip: CHIEFLAND, FL 32626 US

Title: D
Name: JONES, JARROD
Address: 11050 NW 10TH AVENUE
City-St-Zip: CHIEFLAND, FL 32626 US

Title: D
Name: FISHER, LAURA
Address: 11050 NW 10TH AVENUE
City-St-Zip: CHIEFLAND, FL 32626 US

Title: D
Name: CHAPMAN, ALTON R
Address: 11050 NW 10TH AVENUE
City-St-Zip: CHIEFLAND, FL 32626 US

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: WINNELLE M HORNE D 01/20/2012

Electronic Signature of Signing Officer or Director — Date