2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47088

FILED Apr 11, 2009 Secretary of State

Entity Name: PIECEMAKERS QUILT GUILD OF BRANDON, INC.

Current Principal Place of Business:				New Principal Place of Business:				
P O BOX 2181 BRANDON, FL 33509 US			120 KNIGHTS AVENUE NORTH BRANDON, FL 33510 US					
Current Mailing Address:				New Mailing Address:				
P O B OX 2 BRANDON	2181 , FL 33509	US						
FEI Number:	65-0313870	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Status	Desired ()	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
DAVIS, ANNA K 601 ASHCROFT DR BRANDON, FL 33511 US				DEPAUL, JUDY 2930 CHELSEA WOODS DRIVE VALRICO, FL 33596 US				
The above in the State		submits this statement for the pu	rpose o	of changing it	ts registered o	office or registered	agent, or both,	
SIGNATURE: JUDY DEPAUL						04/11/2009		
	Electron	ic Signature of Registered Agen	nt			Date	_	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	T () COLE, JANET 1408 MONTE L VALRICO, FL 3			Title: Name: Address: City-St-Zip:	()) Change()Addition		
Title: Name: Address: City-St-Zip:	P () TORRES, JAYN 403 COASTLINI VALRICO, FL 3	E WAY		Title: Name: Address: City-St-Zip:	DEPAUL, JUDY	A WOODS DRIVE		
Title: Name: Address: City-St-Zip:	VP () MCCATTY, KAT 11005 RIVERVI RIVERVIEW, FI	EW DR		Title: Name: Address: City-St-Zip:	REBHUN, CATH 2556 ARBORW	VOOD DRIVE		
Title: Name: Address: City-St-Zip:	D () INGRAM, CLAU 834 CITRUS W VALRICO, FL 3	OOD LN		Title: Name: Address: City-St-Zip:	()) Change()Addition		
Title: Name: Address: City-St-Zip:	D () WYLY, CHERY 117 JULIE LANI BRANDON, FL	≣		Title: Name: Address: City-St-Zip:	D (X WILLIAMS, DE 1913 BLUE SA BRANDON, FL	GE COURT		
Title: Name: Address: City-St-Zip:	D () MAHONEY, RU 8806 CROSS L RIVERVIEW, FI	ANDING LANE		Title: Name: Address: City-St-Zip:	D (X TORRES, JAYI 403 COAST LII VALRICO, FL	VE WAY		

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: JANET A. COLE T 04/11/2009