

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002418

FILED
Jun 19, 2006
Secretary of State

Entity Name: TREE CITY QUILTERS GUILD, INC.

Current Principal Place of Business:

PO BOX 358425
GAINESVILLE, FL 326358425

New Principal Place of Business:

Current Mailing Address:

PO BOX 358425
GAINESVILLE, FL 326358425

New Mailing Address:

FEI Number: 59-3217109 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PUCKETT, DEBRA
3600 NW 43RD ST BLDG G
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

PUCKETT, DEBRA
3600 NW 43RD STREET
SUITE G
GAINESVILLE, FL 32605 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

06/19/2006

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCCULLOCH, DENISE
Address: 1906 SE 47TH TERRACE
City-St-Zip: GAINESVILLE, FL 32601

Title: VP () Delete
Name: MALKEMUS, VALERIE
Address: 2715 NW 25TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: S () Delete
Name: YURCHISIN, JOYCE
Address: 2016 NW 26 ST
City-St-Zip: GAINESVILLE, FL 32605

Title: T () Delete
Name: PUCKETT, DEBRA
Address: PO BOX 358425
City-St-Zip: GAINESVILLE, FL 326358425

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MALKEMUS, VALERIE
Address: 2715 NW 25TH PLACE
City-St-Zip: GAINESVILLE, FL 32601

Title: VP (X) Change () Addition
Name: BAGNALL, JUANITA
Address: 2806 NE 17TH DRIVE
City-St-Zip: GAINESVILLE, FL 32609

Title: S (X) Change () Addition
Name: MORROW, MARY LOU
Address: 1717 NW 23 AVE 5-D
City-St-Zip: GAINESVILLE, FL 32605

Title: T (X) Change () Addition
Name: MALLETT, ELLEN
Address: 5010 NE WALDO ROAD #3
City-St-Zip: GAINESVILLE, FL 32609

I hereby certify that the information supplied with this filing does not qualify for the 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: VALERIE MALKEMUS

Electronic Signature of Signing Officer or Director

P

06/19/2006

Date