


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 06, 2008 8:00 am**  
**Secretary of State**

05-06-2008 90037 002 \*\*\*\*61.25

<b>DOCUMENT # N94000002418</b>					
1. Entity Name <b>TREE CITY QUILTERS GUILD, INC.</b>					
Principal Place of Business <b>5010 NE WALDO RD #3 GAINESVILLE, FL 32609</b>		Mailing Address <b>PO BOX 358425 GAINESVILLE, FL 32635-8425</b>			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <b>PO BOX 358425</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State <b>GAINESVILLE FL</b>		4. FEI Number <b>59-3217109</b>	
Zip	Country	Zip <b>32635</b>	Country <b>USA</b>	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>MALLELLE, ELLEN 5010 NE WALDO RD #3 GAINESVILLE, FL 32609</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<b>FL</b>		Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	<b>JACKIE REICHERDT</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>MALKEMUS, VALERIE</b>		NAME	<b>1813 NW 93RD DR</b>	
STREET ADDRESS	<b>2715 NW 25TH PLACE</b>		STREET ADDRESS	<b>GAINESVILLE FL 32606</b>	
CITY-ST-ZIP	<b>GAINESVILLE, FL 32601</b>		CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	<b>VP Dotty VICKERY</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>BAGNALL, JUANITA</b>		NAME	<b>905 NW 10th AVE</b>	
STREET ADDRESS	<b>2806 NE 17TH DRIVE</b>		STREET ADDRESS	<b>GAINESVILLE FL 32605</b>	
CITY-ST-ZIP	<b>GAINESVILLE, FL 32609</b>		CITY-ST-ZIP		
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	<b>S KIMBERLY HADDCKO</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>MORROW, MARY LOU</b>		NAME	<b>1640 NW 23RD ST</b>	
STREET ADDRESS	<b>1717 NW 23 AVE 5-D</b>		STREET ADDRESS	<b>GAINESVILLE FL 32605</b>	
CITY-ST-ZIP	<b>GAINESVILLE, FL 32605</b>		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MALLETTE, ELLEN</b>		NAME		
STREET ADDRESS	<b>5010 NE WALDO ROAD #3</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>GAINESVILLE, FL 32609</b>		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <b>Ellen Mallette ELLEN MALLETTE</b>			Date: <b>4/16/08</b> 352 Daytime Phone #: <b>378-2950</b>		