2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90122 007 ****61.25

DOCUMENT # N94000002418

1. Entity Name
TREE CITY QUILTERS GUILD, INC.

Principal Place of Business
PO BOX 140-698
GAINESVILLE FL 32614-0698

Mailing Address
PO BOX 140-698
GAINESVILLE FL 32614-0698

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3217109 | Applied For | Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
TUCKER, MARSHA
1515 NW 51 TERRACE
GAINESVILLE FL 32605

7. Name and Address of New Registered Agent
Name: Dorothy S. Vickery
Street Address (P.O. Box Number is Not Acceptable): 905 NW 10th Ave.
City: Gainesville FL Zip Code: 32601

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: Dorothy S. Vickery — Signature, typed or printed name of registered agent and title if applicable.
Dorothy S. Vickery Treasurer — (NOTE: Registered Agent signature required when reinstating)
DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	FUENTES, SHARON	10204 NW 156 AVE	ALACHUA FL 32615	☐
VD	BROWN, ANN-MARIE	1225 NW 80 DRIVE	GAINESVILLE FL 32607	☐
SD	MALKEMES, VALERIE	2715 NW 25 PLACE	GAINESVILLE FL 32605	☐
TD	TUCKER, MARSHA	1515 NW 51 TERRACE	GAINESVILLE FL 32605	☒
				☐
				☐

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
				☐	☐
				☐	☐
				☐	☐
TD	Vickery, Dorothy S.	905 NW 10th Ave.	Gainesville, FL 32601	☐	☒
				☐	☐
				☐	☐

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Dorothy S. Vickery TD — Dorothy S. Vickery — 352-376-8488

CR2E037 (10/02)