

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16348

Entity Name: CORAL SPRINGS QUILTERS, INC.**Current Principal Place of Business:**1440 CORAL RIDGE DR.
SUITE 364
CORAL SPRINGS, FL 33071**Current Mailing Address:**1440 CORAL RIDGE DR.
SUITE 364
CORAL SPRINGS, FL 33071 US**FEI Number:** 59-2683217**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ESPOSITO, LINDA J
1155 NW 114 AVE
CORAL SPRINGS, FL 33071 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_____
Date**Officer/Director Detail :**

Title	PD
Name	BAXTER, DIANE
Address	410 MARKHAMS
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	VPD
Name	ALLEN, CAROLYN
Address	7805 NW 39TH CT
City-State-Zip:	CORAL SPRINGS FL 33065

Title	SD
Name	GORDON, LINDA
Address	3323 CARAMBOLA CIR S
City-State-Zip:	COCONUT CREEK FL 33066

Title	TD
Name	ESPOSITO, LINDA J
Address	1155 NW 114 AVE
City-State-Zip:	CORAL SPRINGS FL 33071

Title	VPD
Name	CARMENT, COOKIE
Address	821 CYPRESS BLVD BLD 99 APT 310
City-State-Zip:	POMPANO BEACH FL 33069

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: LINDA J ESPOSITO**TREASURER****04/19/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date