

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25903

Entity Name: QUILTFEST, INC. OF JACKSONVILLE, FLORIDA**Current Principal Place of Business:**232 N CHECKERBERRY WAY
ST JOHNS, FL 32259**Current Mailing Address:**232 N CHECKERBERRY WAY
ST JOHNS, FL 32259 US**FEI Number: 59-2936093****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**STEMETZKI, YVONNE E
232 N CHECKERBERRY WAY
ST JOHNS, FL 32259 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: YVONNE E STEMETZKI****01/12/2014**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	GALLOWAY, GAIL
Address	1586 WATERS EDGE DR
City-State-Zip:	FLEMING ISLAND FL 32003

Title	V
Name	GLARY, MARY ANN
Address	1408 PINEWOOD ROAD
City-State-Zip:	JACKSONVILLE FL 32250

Title	S
Name	FROST, ISABELL
Address	9176 AUGUST CIRCLE
City-State-Zip:	ST AUGUSTINE FL 32080

Title	T
Name	STEMETZKI, YVONNE E
Address	232 N CHECKERBERRY WAY
City-State-Zip:	ST JOHNS FL 32259

Title	C
Name	ALLEN, CAROLYN
Address	2747 VIA BAYA LANE
City-State-Zip:	JACKSONVILLE FL 32223

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: YVONNE E STEMETZKI**TREASURER****01/12/2014**

Electronic Signature of Signing Officer/Director Detail

Date