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.

т

SIGNATURE: Y ELAINE STEMETZKI

I

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail ·

SIGNATURE: Y ELAINE STEMETZKI

Officer/Director Detail :				
	Title	TREASURER	Title	PRESIDENT
	Name	STEMETZKI, Y ELAINE	Name	ALLEN, CAROLYN
	Address	232 N CHECKERBERRY WAY	Address	2747 VIA BAYA LANE
	City-State-Zip:	ST JOHNS FL 32259	City-State-Zip:	JACKSONVILLE FL 32223
	Title	VP	Title	SECRETARY
	Name	FROST, ISABELL	Name	HOWLE, MARY ALICE
	Address	9178 AUGUST CIRCLE	Address	428 WYNFIELD CIRCLE
	City-State-Zip:	ST AUGUSTINE FL 32080	City-State-Zip:	FLEMING ISLAND FL 32003
			,	

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.

Electronic Signature of Registered Agent

Name and Address of Current Registered Agent:

STEMETZKI, Y ELAINE 232 N CHECKERBERRY WAY

ST JOHNS, FL 32259 US

ST JOHNS. FL 32259 US

ST JOHNS. FL 32259

2018 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

Current Mailing Address:

232 N CHECKERBERRY WAY

FEI Number: 59-2936093

Certificate of Status Desired: No

FILED Mar 04, 2018 Secretary of State CC6492085167

03/04/2018 Date

03/04/2018 Date