

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25903

Entity Name: QUILTFEST, INC. OF JACKSONVILLE, FLORIDA**Current Principal Place of Business:**1529 HIGHLAND FOREST DR.
ST JOHNS, FL 32259**Current Mailing Address:**1529 HIGHLAND FOREST DR.
ST JOHNS, FL 32259 US**FEI Number: 59-2936093****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GUILFORD, PATRICIA M
1529 HIGHLAND FOREST DR.
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: PATRICIA M. GUILFORD****01/19/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name GUILFORD, PATRICIA
Address 1529 HIGHLAND FOREST DR.
City-State-Zip: ST. JOHNS FL 32259

Title V
Name D'ELIA, PAT
Address 14389 FALAN CT.
City-State-Zip: JACKSONVILLE FL 32223

Title PRESIDENT
Name FROST, ISABELL
Address 9178 AUGUST CIRCLE
City-State-Zip: ST AUGUSTINE FL 32080

Title SECRETARY
Name WILSON, LINDA
Address 1959 BLUE BIRD RUN E
City-State-Zip: ORANGE PARK FL 32217

Title C
Name REITER, MAUREEN
Address 4045 SABEL DR.
City-State-Zip: JACKSONVILLE FL 32277

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: PATRICIA M GUILFORD**TREASURER****01/19/2016**

Electronic Signature of Signing Officer/Director Detail

Date