2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003880

Entity Name: QUILTERS CO-OP, INC.

FILED Feb 15, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

100 S. PALM 107 E. CENTRAL AVE.

HOWEY IN THE HILLS, FL 34737 HOWEY IN THE HILLS, FL 34737

Current Mailing Address: New Mailing Address:

902 CAMINO REAL 14 CAMINO REAL

HOWEY IN THE HILLS, FL 34737 HOWEY IN THE HILLS, FL 34737

FEI Number: 72-1565077 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LYONS, MARY ANN
902 CAMINO REAL
LYONS, MARY ANN
14 CAMINO REAL

HOWEY IN THE HILLS, FL 34737 US HOWEY IN THE HILLS, FL 34737 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: MARY ANN LYONS 02/15/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPST () Delete Title: CPST (X) Change () Addition Name: LYONS, MARY ANN Name: LYONS, MARY ANN

Address: 902 CAMINO REAL Address: 14 CAMINO REAL

City-St-Zip: HOWEY IN THE HILLS, FL 34737 City-St-Zip: HOWEY IN THE HILLS, FL 34737

Title: D () Delete Title: D (X) Change () Addition Name: LYONS, GERARD A Name: LYONS, GERARD A

Address: 902 CAMINO REAL Address: 14 CAMINO REAL

City-St-Zip: HOWEY IN THE HILLS, FL 34737 City-St-Zip: HOWEY IN THE HILLS, FL 34737

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY ANN LYONS PRES 02/15/2006