

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005750

FILED  
Apr 30, 2011  
Secretary of State

**Entity Name:** THE TAPESTRY GROUP, INC.

**Current Principal Place of Business:**

17220 WRIGHT STREET  
SUITE 200  
OMAHA, NE 68130

**New Principal Place of Business:**

2605 N. 164TH CIRCLE  
OMAHA, NE 68116

**Current Mailing Address:**

17220 WRIGHT STREET  
SUITE 200  
OMAHA, NE 68130

**New Mailing Address:**

2605 N. 164TH CIRCLE  
OMAHA, NE 68116

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

ZIMMERMAN, NEVIN J  
475 HARRISON AVE  
SUITE 100  
PANAMA CITY, FL 32401 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DURANT, RYAN  
Address: 2605 N. 164TH CIRCLE  
City-St-Zip: OMAHA, NE 68116

Title: VP  
Name: WILCOX, MICHAEL  
Address: 17220 WRIGHT STREET, SUITE 200  
City-St-Zip: OMAHA, NE 68130

Title: S  
Name: MURANTE, SAM  
Address: 7324 ONTARIO STREET  
City-St-Zip: OMAHA, NE 68124

Title: D  
Name: WILCZEWSKI, MARK  
Address: 3515 SE 11TH STREET  
City-St-Zip: GRESHAM, OR 97080

Title: D  
Name: KEATING, JERRY  
Address: 17220 WRIGHT STREET SUITE 200  
City-St-Zip: OMAHA, NE 68124

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: RYAN DURANT

P

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date