

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K24979

FILED  
Jan 17, 2005  
Secretary of State

Entity Name: SUZANNE'S QUILT SHOP, INC.

## Current Principal Place of Business:

1112 ROYAL PALM BEACH BLVD.  
ROYAL PALM BCH, FL 33411 US

## New Principal Place of Business:

## Current Mailing Address:

C/O SUZANNE LEIMER  
11128 42ND RD N  
ROYAL PLAM BCH, FL 33411 US

## New Mailing Address:

FEI Number: 65-0055229

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KATHLEEN A. PAPARELLA, P.A.  
12765 W. FOREST HILL BLVD.  
SUITE 1302  
W. PALM BCH, FL 33414 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LEIMER, SUZANNE LAIR, D  
Address: 11128 42ND RD N  
City-St-Zip: ROYAL PALM BCH, FL

Title: VP ( ) Delete  
Name: LAIRD, NORA  
Address: 13944 ENCANTARDO  
City-St-Zip: FT PIERCE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SUZANNE LAIRD LEIMER

P

01/17/2005

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

\_\_\_\_\_  
Date