

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002258

FILED
Jun 12, 2006
Secretary of State

Entity Name: CYPRESS CREEK QUILTER'S GUILD, INC.

Current Principal Place of Business:

1049 HELMSDALE DRIVE
WESLEY CHAPEL, FL 335433913

New Principal Place of Business:

Current Mailing Address:

1049 HELMSDALE DRIVE
WESLEY CHAPEL, FL 335433913

New Mailing Address:

FEI Number: 20-2391674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GRIFFIN, DARLENE B
1049 HELMSDALE DRIVE
WESLEY CHAPEL, FL 335433913 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: DP () Delete
Name: GRIFFIN, DARLENE
Address: 1049 HELMSDALE DRIVE
City-St-Zip: WESLEY CHAPEL, FL 335433913

Title: DVP () Delete
Name: WAECHTER, KAREN
Address: 1049 HELMSDALE DRIVE
City-St-Zip: WESLEY CHAPEL, FL 335433913

Title: DS () Delete
Name: RADER, MARY
Address: 1049 HELMSDALE DRIVE
City-St-Zip: WESLEY CHAPEL, FL 335433913

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: GRIFFIN, DARLENE
Address: 1049 HELMSDALE DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33543 39

Title: DP (X) Change () Addition
Name: WAECHTER, KAREN
Address: 22336 MAGNOLIA TRACE BLVD
City-St-Zip: LUTZ, FL 33549

Title: DS (X) Change () Addition
Name: WOERNER, JUDITH
Address: 12401 NORTH 52ND STREET
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: DVP () Change (X) Addition
Name: WILSON, DIANE
Address: 1340 MAXMILIAN DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33543

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DARLENE B GRIFFIN

DT

06/12/2006

Electronic Signature of Signing Officer or Director

Date