

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002258

FILED
Apr 16, 2009
Secretary of State

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

Current Principal Place of Business:

3403 MORNING SET CT
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

3403 MORNING SET CT
TAMPA, FL 33614

New Mailing Address:

P O BOX1446
LAND O LAKES, FL 33639

FEI Number: 20-2391674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIN, DARLENE
1049 HELMSDALE DR
WESLEY CHAPEL, FL 33543 US

Name and Address of New Registered Agent:

YUCATONIS, PATRICIA A
3403 MORNING SET CT
TAMPA, FL 33614 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 A YUCATONIS

04/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BARTHOLOMEW, JOYCE
Address: 3304 PARKWAY BLVD
City-St-Zip: LAND O LAKES, FL 34639

Title: DV () Delete
Name: TOKISCH, CATHLEENE
Address: 25546 RISEN STAR DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: DS () Delete
Name: ERIKSEN, DIANE
Address: 1521 BAYTHORN DR
City-St-Zip: WESLEY CHAPEL, FL 33625

Title: DT () Delete
Name: YUCATONIS, PATRICIA A
Address: 3403 MORNING SET CT
City-St-Zip: TAMPA, FL 33614

Title: FNDR () Delete
Name: GRIFFIN, DARLENE B
Address: 1049 HELMSDALE DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33543 US

Title: PAR () Delete
Name: DOHR, BECKY
Address: 6321 FROST ST
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DS (X) Change () Addition
Name: FIOS, SUSAN
Address: 1115 BAYSHORE DR
City-St-Zip: WESLEY CHAPEL, FL 33625

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

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 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: PATRICIA A YUCATONIS

DT

04/16/2009

Electronic Signature of Signing Officer or Director

Date