

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002931

FILED  
Apr 21, 2009  
Secretary of State

**Entity Name:** LADIES OF THE LAKES QUILT GUILD, INC.

**Current Principal Place of Business:**

3030 N. FLORIDA AVENUE  
LAKELAND, FL 33805

**New Principal Place of Business:**

**Current Mailing Address:**

337 MEDORA STREET  
AUBURNDALE, FL 33823

**New Mailing Address:**

**FEI Number:** 59-3634401

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBINSON, LINDA  
337 MEDORA STREET  
AUBURNDALE, FL 33823 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 ( ) Delete  
Name: LLOYD, LEESA  
Address: 7762 CANTERBURY CIRCLE  
City-St-Zip: LAKELAND, FL 33810

Title: V ( ) Delete  
Name: CHARLOTTE, GATES  
Address: 1817 MASTRS LANE  
City-St-Zip: LAKELAND, FL 33810

Title: S ( ) Delete  
Name: CANNON, CHARLOTTE  
Address: 4402 FAIRWAY OAKS CT.  
City-St-Zip: MULBERRY, FL 33860

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: V (X) Change ( ) Addition  
Name: JOHNSON, BEA  
Address: 2635 SLEEPYHOLLOW RD  
City-St-Zip: LAKELAND, FL 33810

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

Title: T ( ) Change (X) Addition  
Name: ROBINSON, LINDA  
Address: 337 MEDORA ST  
City-St-Zip: AUBURNDALE, FL 33823

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: LINDA ROBINSON

T

04/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date