2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2012
Secretary of State

DOCUMENT# N07000001027

Entity Name: MARTIN COUNTY QUILTERS INC

Current Principal Place of Business:

4164 SE FAIRWAY EAST
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

MARTIN COUNTY QUILTERS
PO BOX 323
PORT SALERNO, FL 34992 US

New Mailing Address:

FEI Number: 61-1522535 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FOSTER, STEFANIE H
4164 SE FAIRWAY EAST
STUART, FL 34997 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: LIPIEC, JOAN
Address: 1501 KINGSLEY RD
City-St-Zip: JUPITER, FL 33469 US

Title: VP
Name: LEVY, ANN
Address: 389 SE SOUTHWOOD TRAIL
City-St-Zip: STUART, FL 34997 US

Title: S
Name: ESTES, CHARLENE
Address: 5688 SE COLLINS AVE.
City-St-Zip: STUART, FL 34997 US

Title: T
Name: ESTABROOKS, DONNA
Address: 5240 SE HARROLD TERRACE
City-St-Zip: STUART, FL 34997 US

Title: VT
Name: MERLE, MARGY
Address: 5667 SE MAJOR WAY
City-St-Zip: STUART, FL 34997 US

Title: RS
Name: FOSTER, STEFANIE
Address: 4164 SE FAIRWAY EAST
City-St-Zip: STUART, FL 34997

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: STEFANIE H. FOSTER RS 01/03/2012

Electronic Signature of Signing Officer or Director Date