

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000011913

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** ESTHER'S WORKSHOP INC.

**Current Principal Place of Business:**

209 82ND STREET  
HOLMES BEACH, FL 34217

**New Principal Place of Business:**

600 MANATEE AVE W  
204  
HOLMES BEACH, FL 34217

**Current Mailing Address:**

PO BOX 1655  
HOLMES BEACH, FL 34218 US

**New Mailing Address:**

**FEI Number:** 26-1566773      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

PITTMAN, SHAREN  
209 82ND STREET  
HOLMES BEACH, FL 34217 US

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

PITTMAN, SHAREN  
600 MANATEE AVE W  
204  
HOLMES BEACH, FL 34217 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/28/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PDT  
Name: PITTMAN, SHAREN  
Address: 600 MANATEE AVE W  
City-St-Zip: HOLMES BEACH, FL 34217

Title: SD  
Name: GAUDIOSO, WENDY  
Address: 600 MANATEE AVE W  
City-St-Zip: HOLMES BEACH, FL 34217

Title: D  
Name: HATTEN, RICHARD  
Address: 2139 CASTLE PINES COURT  
City-St-Zip: HAMILTON, OH 45013

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: SHAREN PITTMAN

PRES

04/28/2012

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

\_\_\_\_\_  
Date