## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07809

FILED Apr 23, 2009 Secretary of State

Entity Name: QUILTERS WORKSHOP OF TAMPA BAY, INC.

Current Principal Place of Business: New Principal Place of Business:

13112 GREENGAGE LANE 1304 S. PINE LAKE DR TAMPA, FL 33612 US TAMPA, FL 33612 US

Current Mailing Address: New Mailing Address:

P.O. BOX 10782 TAMPA, FL 33679

FEI Number: 59-2497314 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

POPE, SHIRLEY MS
13112 GREENGAGE LANE
TAMPA, FL 33612 US
LIBBY, DELILAH MS
806 S. MACDILL AVE.
TAMPA, FL 33609 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: DELILAH LIBBY 04/23/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: P (X) Change () Addition Name: POPE, SHIRLEY Name: MAHONEY, MARY MS

 Name:
 POPE, SHIRLEY
 Name:
 MAHONEY, MARY MS

 Address:
 13112 GREENGAGE LANE
 Address:
 1304 PINE LAKE DR

 City-St-Zip:
 TAMPA, FL 33612
 City-St-Zip:
 TAMPA, FL 33612

Title: VD ( ) Delete Title: VP (X) Change ( ) Addition Name: ZINKOSKY, TAMMY Name: PALMER, GLENDA MS

Address: 6109 S RUSSELL ST Address: 7325 GUILFORD PINE LN City-St-Zip: TAMPA, FL 33611 City-St-Zip: APOLLO BEACH, FL 33572

 $\label{eq:title:sdef} {\sf Title:} \qquad {\sf SD} \qquad (\ ) \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad ({\sf X}) \ {\sf Change} \ (\ ) \ {\sf Addition}$ 

 Name:
 MAHONEY, MARY
 Name:
 SMITH, LARINDA

 Address:
 1304 S. PINE LAKE DR
 Address:
 3013 MASON ST

 City-St-Zip:
 TAMPA, FL 33612
 City-St-Zip:
 TAMPA, FL 33629

 Name:
 LIBBY, DELILAH
 Name:
 PALMER, GLENDA

 Address:
 806 S. MACDILL AVE
 Address:
 6937 RIVERGATE AVE

 City-St-Zip:
 TAMPA, FL 33609
 City-St-Zip:
 TAMPA, FL 33637

Title: PD ( ) Delete Title: AS (X) Change ( ) Addition

Name:MCMURREY, BECKYName:HANDLIN, MARGARETAddress:3404 ROSEVILLE CTAddress:11509 BELMACK BLVD S.City-St-Zip:TAMPA, FL 33618City-St-Zip:ODESSA, FL 33556

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: DELILAH LIBBY T 04/23/2009