

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005599

FILED
Apr 26, 2009
Secretary of State

Entity Name: ART QUILTERS UNLIMITED, INCORPORATED

Current Principal Place of Business:

10091 MCGREGOR BLVD.
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

2510 SW 37TH STREET
CAPE CORAL, FL 33914

New Mailing Address:

FEI Number: 26-2855304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRANDE, JOYCE
2510 SW 37TH ST.
CAPE CORAL, FL 33914 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: TURNER, PATRICIA
Address: 1830 BANANA ST.
City-St-Zip: CHARLOTTE HARBOR, FL 33980

Title: V () Delete
Name: GRANDE, JOYCE
Address: 2510 SW 37TH ST.
City-St-Zip: CAPE CORAL, FL 33914

Title: S () Delete
Name: WALKER, MECHELLE C
Address: 1121 NW 43RD AVE.
City-St-Zip: CAPE CORAL, FL 33993

Title: T () Delete
Name: WARREN, CAROL
Address: 1030 AGUA LANE
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCKAY, JERI
Address: 1146 AUGUSTA FALLS WAY
City-St-Zip: NAPLES, FL 34119

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

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

Title: T (X) Change () Addition
Name: BALMER, JOAN
Address: 1077 ORTON ST
City-St-Zip: PORT CHARLOTTE, FL 33952

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: JOYCE GRANDE

V

04/26/2009

Electronic Signature of Signing Officer or Director

Date