

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
Feb 06, 2006 8:00 am  
Secretary of State

02-06-2006 90050 042 \*\*\*\*61.25

<b>DOCUMENT # N27680</b> 1. Entity Name <b>FRIENDSHIP QUILTERS GUILD, INC.</b>					
Principal Place of Business <b>% P.O. BOX 1411 ORANGE PARK, FL 32067-1411 US</b>			Mailing Address <b>% P.O. BOX 1411 ORANGE PARK, FL 32067-1411 US</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>59-2746383</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <b>CRAWFORD, MARTHA W 3714 HAVENWOOD RD. MIDDLEBURG, FL 32068</b>				7. Name and Address of New Registered Agent Name <b>JACQUELINE MOONEYHAM</b> Street Address (P.O. Box Number is Not Acceptable) <b>233 CHESTNUT COURT</b> City <b>ORANGE PARK</b> FL Zip Code <b>32073</b>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>Jacqueline Mooneyham</i> , <b>JACQUELINE MOONEYHAM, TREASURER</b> <small>Signature typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE <b>2-3-06</b>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MEIERDIERCK, BEVERLY 2561 PIRATES BAY DR. FERNANDINA BEACH, FL 32034	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP NAPIERALA, PAT 1670 WATERS EDGE DRIVE ORANGE PARK, FL 32003	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP NAPIERALA, PAT 1670 WATERS EDGE DR. ORANGE PARK, FL 32003	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP GLEASON, DIANE 6045 SHAKESPEARE DRIVE JACKSONVILLE, FL 32244	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GLEASON, DIANE 6045 SHAKESPEARE DR. JACKSONVILLE, FL 32244	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ARGUS, JUNE 4714 ANVERS BLVD JACKSONVILLE, FL 32210	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CRAWFORD, MARTHA 3714 HAVENWOOD RD. MIDDLEBURG, FL 32068	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MOONEYHAM, JACQUELINE 233 CHESTNUT COURT ORANGE PARK, FL 32073	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Jacqueline Mooneyham</i> , <b>JACQUELINE MOONEYHAM, TREASURER</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> DATE <b>2-3-06</b> Daytime Phone # <b>(904) 269-0969</b>					