## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

## Jan 25, 2006 8:00 am **Secretary of State** DOCUMENT # N94000001958 01-25-2006 90023 040 \*\*\*\*61.25 QUILTERS UNLIMITED OF TALLAHASSEE, INC. Principal Place of Business Mailing Address 3605 BELLINGRADE CT PO BOX 4324 TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32315 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01232006 Cha-NP CR2E037 (11/05) City & State City & State 4. FEI Number 59-3585077 Applied For Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RICHE, LINDA 3605 BELLINGRADE CT Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE, FL 32309 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PDF PD MLE ☐ Delete TITLE ☐ Addition TRIBBLE, BYRD NAME NAME STREET ADDRESS 2509 CLINE ST STREET ADDRESS TALLAHASSEE, FL 32308 CITY-ST-7IP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition EBEL, BETTY E STREET ADDRESS 2103 WOODSTOCK LANE STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32303 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition BERTELS, SHELLEY W NAME NAME STREET ADDRESS 5988 ANSEL FERREL ROAD STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32309 CITY-ST-ZIP TITLE VP Delete TITLE Change ☐ Addition NAME WINKLER, MAGGIE NAME STREET ADDRESS 4125 ARKLOW DR STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32309 CITY-ST-ZIP TITLE ☐ Delete TITLE VP X Change ☐ Addition MILDENBERGER, VICKIE NAME 4241 ROCKINGHAM RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32303 CITY-ST-7IP TITLE Addition ☐ Delete TITLE Change SHARON POLLOCK 5950COLONGL 6COTT NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TALLAHASSBE, FL 32309 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Horida 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 appearers, with all other like appowered.

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