

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004646

FILED
Feb 10, 2009
Secretary of State

Entity Name: CHARLOTTE QUILTERS GUILD, INC.

Current Principal Place of Business:

1ST PREBYTERIAN CHURCH
2230 HARIET ST. NE
PORT CHARLOTTE, FL 34952

New Principal Place of Business:

Current Mailing Address:

CHARLOTTE QUILTERS GUILD
P.O. BOX 380711
MURDOCK, FL 33938

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATSEL, C. GUY
1861 PLACIDA ROAD
SUITE 204
ENGLEWOOD, FL 34223 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: S () Delete
Name: TWYLA, LEGRUE
Address: 17145 NIXON AVE.
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: P () Delete
Name: LICHTER, SHARON
Address: 11244 S.W. ESSEX DR.
City-St-Zip: LAKE SUZY, FL 34269

Title: T () Delete
Name: ISENNOCK, PAT
Address: 2473 EDNOR ST
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: MARTY, FRAGALE
Address: 22397 ADORN AVE.
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: P (X) Change () Addition
Name: REBECCA, BAIRD
Address: 1365 ALTON RD.
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: T (X) Change () Addition
Name: HART, DONNA K
Address: 23091 ELMIRA BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33980

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: DONNA K. HART

TREA

02/10/2009

Electronic Signature of Signing Officer or Director

Date