

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003136

FILED
Apr 06, 2005
Secretary of State

Entity Name: THE TEXTILE GUILD OF ST. AUGUSTINE, INC.

Current Principal Place of Business:

C/O JEAN LIGHT WILLIS
27 ALCIRA COURT
ST AUGUSTINE, FL 32086 US

Current Mailing Address:

C/O JEAN LIGHT WILLIS
27 ALCIRA COURT
ST AUGUSTINE, FL 32086 US

New Principal Place of Business:

C/O OLD ST. AUGUSTINE VILLAGE
246 ST. GEORGE ST.
ST AUGUSTINE, FL 32084 US

New Mailing Address:

C/O MURIEL PIPITONE
5348 FIFTH ST.
ST AUGUSTINE, FL 32080 US

FEI Number: 59-3441108

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLES, JOSEPH L JR
120 CHARLOTTE ST
ST AUGUSTINE, FL 32084 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: WILLIS, JEAN LIGHT
Address: 27 ALCIRA COURT
City-St-Zip: SAINT AUGUSTINE, FL 32086 US

Title: T, S () Delete
Name: PIPITONE, MURIEL
Address: 5348 FIFTH STREET
City-St-Zip: ST AUGUSTINE, FL 32080

Title: V () Delete
Name: KOZA, PAULA
Address: 32 SEASIDE CAPER ROAD
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BAILEY, MARILYN
Address: 11 BRIDGE ST.
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

Title: T (X) Change () Addition
Name: PIPITONE, MURIEL
Address: 5348 FIFTH STREET
City-St-Zip: ST AUGUSTINE, FL 32080

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

Title: S () Change (X) Addition
Name: SIESS, MARY
Address: 3590 LONE WOLF TRAIL
City-St-Zip: ST. AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MURIEL PIPITONE

T

04/06/2005

Electronic Signature of Signing Officer or Director

Date