

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006414

FILED
Mar 21, 2006
Secretary of State

Entity Name: FLORIDA KEYS QUILTERS, INCORPORATED

Current Principal Place of Business:

171 HOOD STREET
TAVERNIER, FL 33070

New Principal Place of Business:

171 HOOD AVE.
TAVERNIER, FL 33070

Current Mailing Address:

PO BOX 2781
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 65-0145318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILKINSON, MARY LOU
38 E BEACH RD
TAVERNIER, FL 33070 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: VPD () Delete
Name: STELZNER, JENNY
Address: 134 BESSIE RD.
City-St-Zip: TAVERNIER, FL 33070

Title: TREA () Delete
Name: SLEDD, TONIA
Address: 62 SUNSET RD.
City-St-Zip: KEY LARGO, FL 33037

Title: P () Delete
Name: WILKINSON, MARY LOU
Address: 38 E BEACH RD
City-St-Zip: TAVERNIER, FL 33070

Title: SEC () Delete
Name: SCOTT, LOUISE
Address: 420 S. COCONUT PALM
City-St-Zip: TAVERNIER, FL 33070

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: TONIA SLEDD

TRES

03/21/2006

Electronic Signature of Signing Officer or Director

Date