

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90263 035 ****61.25

DOCUMENT # N98000006312

1. Entity Name
SUNBONNET SUE QUILTERS GUILD, INC.



Principal Place of Business
**3306 20TH STREET
VERO BEACH, FL 32960**

Mailing Address
**P O BOX 1011
VERO BCH, FL 32961**



2. Principal Place of Business - No P.O. Box #
Church of Christ

3. Mailing Address
P

Suite, Apt. #, etc.
3306 20th Street

Suite, Apt. #, etc.
P O B 1011

City & State
Vero Beach, FL 32960

City & State
Vero Beach, FL

Zip
32960

Country
USA

Zip
32961

Country
U.S.A.

01052007 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0886207

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MCHUGH, JOHN J
333 17TH STREET SUITE U
VERO BEACH, FL 32960**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 reissuing)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
D ☐ Delete
NAME
LESTER, PATRICIA L
STREET ADDRESS
304 GROVE ISL CIRCLE
CITY-ST-ZIP
VERNON, FL 32462

TITLE
D ☐ Delete
NAME
PASTMAN, BARBARA
STREET ADDRESS
880 WHITETAIL AVE. SW
CITY-ST-ZIP
VERO BEACH, FL 32968

TITLE
D ☒ Delete
NAME
HITE, JANE
STREET ADDRESS
1637 SE DOME CIRCLE
CITY-ST-ZIP
PORT SAINT LUCIE, FL 34952

TITLE
D ☒ Delete
NAME
KRUITEN, ALICE L
STREET ADDRESS
P.O. BOX 651055
CITY-ST-ZIP
VERO BEACH, FL 32965

TITLE
D ☐ Delete
NAME
KRUITEN, ALICE L
STREET ADDRESS
P.O. BOX 651055
CITY-ST-ZIP
VERO BEACH, FL 32965

TITLE
D ☐ Delete
NAME
KRUITEN, ALICE L
STREET ADDRESS
P.O. BOX 651055
CITY-ST-ZIP
VERO BEACH, FL 32965

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
D ☐ Change ☐ Addition
NAME
KRUITEN, ALICE L
STREET ADDRESS
P.O. BOX 651055
CITY-ST-ZIP
VERO BEACH, FL 32965

TITLE
D ☐ Change ☐ Addition
NAME
KRUITEN, ALICE L
STREET ADDRESS
P.O. BOX 651055
CITY-ST-ZIP
VERO BEACH, FL 32965

TITLE
D ☒ Change ☐ Addition
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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: *Alice L. Kruiten* **Alice L. Kruiten** **1/6/07** **772-468-0550**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #