

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006312

FILED  
Jan 29, 2009  
Secretary of State

Entity Name: SUNBONNET SUE QUILTERS GUILD, INC.

**Current Principal Place of Business:**

CHURCH OF CHRIST  
3306 20TH STREET  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1011  
VERO BCH, FL 32961

**New Mailing Address:**

FEI Number: 65-0886207

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCHUGH, JOHN J  
333 17TH STREET SUITE U  
VERO BEACH, FL 32960 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: D ( ) Delete  
Name: LESTER, PATRICIA L  
Address: 304 GROVE ISL CIRCLE  
City-St-Zip: VERNON, FL 32462

Title: D ( ) Delete  
Name: DEMPSEY, BARBARA  
Address: 117 38TH COURT  
City-St-Zip: VERO BEACH, FL 32968

Title: D ( ) Delete  
Name: HABERMAN, MARCIA  
Address: 950 CROWN STREET  
City-St-Zip: VERO BEACH, FL 32965

Title: D ( ) Delete  
Name: BELL, MARGARET D  
Address: 1716 24TH AVE  
City-St-Zip: VERO BEACH, FL 32960

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: LESTER, PATRICIA L  
Address: 304 GROVE ISL CIRCLE  
City-St-Zip: VERO BEACH, FL 32962

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 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: PATRICIA L LESTER

D

01/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date