

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000027354

**FILED**  
**Feb 27, 2012**  
**Secretary of State**

**Entity Name:** ITCHIN' TO BEE STITCHIN', INC.

**Current Principal Place of Business:**

228 FIELD END STREET  
SARASOTA, FL 34240

**New Principal Place of Business:**

201 FIELD END STREET  
SARASOTA, FL 34240

**Current Mailing Address:**

228 FIELD END STREET  
SARASOTA, FL 34240

**New Mailing Address:**

201 FIELD END STREET  
SARASOTA, FL 34240

**FEI Number:** 03-0406684

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NASH, MARSHA PRES.  
4478 LONGFORD DRIVE  
SARASOTA, FL 34232 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: DP  
Name: NASH, MARSHA  
Address: 4478 LONGFORD DRIVE  
City-St-Zip: SARASOTA, FL 34232

Title: DVP  
Name: NASH, MIKE  
Address: 4478 LONGFORD DRIVE  
City-St-Zip: SARASOTA, FL 34232

Title: DS  
Name: SLABACH, KAREN  
Address: 7011 RIVER CLUB BLVD.  
City-St-Zip: BRADENTON, FL 34202

Title: DT  
Name: SLABACH, LLOYD  
Address: 7011 RIVER CLUB BLVD.  
City-St-Zip: BRADENTON, FL 34202

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LLOYD SLABACH

D

02/27/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date