

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000108398

1. Entity Name
CORNERSTONE QUILT SHOP INCORPORATED



Principal Place of Business
5953 EAST COLONIAL DR
SUITE 2
ORLANDO, FL 32807 US

Mailing Address
5953 EAST COLONIAL DR
SUITE 2
ORLANDO, FL 32807 US

FILED
Aug 21, 2008 08:00 AM
Secretary of State



07152008 No Chg-P CR2E034 (11/05)

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4. FEI Number 20-3263913	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

8. Name and Address of Current Registered Agent

DICKERSON, JUDY J
5953 EAST COLONIAL DR
SUITE 2
ORLANDO, FL 32807

**DO NOT WRITE
IN THIS SPACE**

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 reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D DICKERSON, JUDY J 3455 ATHENA DRIVE WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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08/21/08-80001-006 150.00

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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 607, 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: *Judy J. Dickerson* JUDY J. DICKERSON 7-15-08 407-6207-6500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #