

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752920

Entity Name: CAPE CORAL HISTORICAL SOCIETY, INC.

Current Principal Place of Business:

544 CULTURAL PARK BLVD
CAPE CORAL, FL 33991

Current Mailing Address:

P O BOX 150637
CAPE CORAL, FL 33915

FEI Number: 59-2298202

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

POTTER, BONNIE
3634 SW 5TH PLCE
CAPE CORAL, FL 33914 US

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: BONNIE POTTER

01/09/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TR
Name STEIN, MERNA L
Address 624 SE 23RD TER
City-State-Zip: CAPE CORAL FL 33990

Title DIRECTOR
Name SANBORN, PAUL
Address 5346 COLONADE COURT
City-State-Zip: CAPE CORAL FL 33904

Title D
Name CONSTANTINO, TONY
Address C/O KEVIN BURNS & ASSOCIATES
4507 SE 16TH PLACE
City-State-Zip: CAPE CORAL FL 33904

Title RS
Name SHIELDS, JEAN
Address 1327 S.W. 27TH TERRACE
City-State-Zip: CAPE CORAL FL 33914

Title VP
Name BARBARA, PEET
Address 2490 VALPARAISO BLVD
City-State-Zip: NORTH FORT MYERS FL 33917

Title DIRECTOR
Name TOMICH, THOMAS
Address C/O PARKWAY ANTIQUES
1320 CAPR CORAL PARKWAY
City-State-Zip: CAPE CORAL FL 33904

Title DIRECTOR
Name SALAFIA, BARBARA
Address 2017 NE 5TH PLACE
City-State-Zip: CAPE CORAL FL 33909

Title DIRECTOR
Name KIRKWOOD, WAYNE
Address 1018 SE 12TH COURT
City-State-Zip: CAPE CORAL FL 33990

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

SIGNATURE: MERNA L. STEIN

TREASURER

01/09/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name EMERSON, PAT
Address 14900 SUMMERLIN WOODS DRIVE
APT. 5
City-State-Zip: FORT MYERS FL 33919

Title DIRECTOR
Name CULL, FRED
Address 3828 SE 2ND AVENUE
City-State-Zip: CAPE CORAL FL 33904

Title PRESIDENT
Name POTTER, BONNIE
Address 3634 SW 5TH PLACE
City-State-Zip: CAPE CORAL FL 33914