## 2017 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: No

Name and Address of Current Registered Agent:

SCHRODER, WENDY 2610 SW 46TH TERRACE 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: WENDY SCHRODER 04/19/2017

Electronic Signature of Registered Agent

Officer/Director Detail:

Name

Title TR Title **PRESIDENT** 

MUNRO, DOUG SCHRODER, WENDY Name Name 630 EL DORADO PARKWAY WEST 2310 SW 46TH TERRACE Address Address CAPE CORAL FL 33914

City-State-Zip: CAPE CORAL FL 33914 City-State-Zip:

Title DIRECTOR Title D Name SHIELDS, JEAN

Address 1107 WINDING PINES CIRCLE #104 Address C/O KEVIN BURNS & ASSOCIATES

4507 SE 16TH PLACE

CAPE CORAL FL 33909 City-State-Zip: CAPE CORAL FL 33904

City-State-Zip: Title

CONSTANTINO, TONY

DIRECTOR Title VΡ Name

PELTIER, JUDY BARBARA, PEET Name

Address 2101 NW 14TH TERRACE 2490 VALPARAISO BLVD Address CAPE CORAL FL 33993 City-State-Zip:

City-State-Zip: NORTH FORT MYERS FL 33917

Title DIRECTOR **DIRECTOR** Title YOUNG, ART Name

Name SALAFIA, BARBARA 9284 TRIESTE DRIVE Address Address 1012 SE 4TH TERRACE

City-State-Zip: FORT MYERS FL 33913 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.

04/19/2017 SIGNATURE: WENDY SCHRODER **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Apr 19, 2017

Secretary of State

CC1701238063

Date

## Officer/Director Detail Continued:

Title PAST PRESIDENT Title SECRETARY

Name POTTER, BONNIE Name MURPHY, WEEZER

Address 3634 SW 5TH PLACE Address 3740 DEL PRADO BOULEVARD #2

City-State-Zip: CAPE CORAL FL 33914 City-State-Zip: CAPE CORAL FL 33904

Title DIRECTOR

Name HAYNES, LINDA Address 517 SE 24TH ST.

City-State-Zip: CAPE CORAL FL 33990