

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000001189

**Entity Name:** SANIBEL-CAPTIVA ART LEAGUE, INC.

**Current Principal Place of Business:**

19243 VINTAGE TRACE CIRCLE  
ESTERO, FL 33967

**Current Mailing Address:**

PO BOX 1192  
SANIBEL, FL 33957

**FEI Number:** 03-0388353

**Certificate of Status Desired:** No

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

SCHEU, VERENA K  
2515 LANDS END PLACE  
SANIBEL, FL 33957 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name STORER, JIM  
Address 19243 VINTAGE TRACE CIRCLE  
City-State-Zip: ESTERO FL 33967

Title VP  
Name FORCE MARSHALL, ANITA  
Address 1119 PERIWINKLE WAY #78  
City-State-Zip: SANIBEL FL 33957

Title S  
Name CLARK, JUDITH  
Address 1120 STEEL BASKET LANE  
City-State-Zip: SANIBEL FL 33957

Title T  
Name SCHEU, VERENA K  
Address 2515 LANDS END PLACE  
City-State-Zip: SANIBEL FL 33957

Title D  
Name RUTLEDGE, JAN  
Address 995 BLACK SKIMMER WAY  
City-State-Zip: SANIBEL FL 33957

Title D  
Name HUDSON, JANE  
Address 14841 CRYSTAL COVE COURT.  
1904  
City-State-Zip: FORT MEYERS FL 33919

Title DIRECTOR  
Name QUIGLEY, LYNN  
Address 2162 EGRET CIRCLE  
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR  
Name MCLAIN, RITA  
Address 7072 SPOTTED FAWN CT.  
City-State-Zip: FORT MYERS FL 33908

**Continues on page 2**

*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:** VERENA K. SCHEU

**TREASURER**

01/02/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            WAINWRIGHT, ANNE  
Address        1550 SAND CASTLE ROAD  
City-State-Zip: SANIBEL FL 33957