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Jan 23 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 709529 (2)

1. Corporation Name

CAPE CORAL RETIRED CITIZENS, INC.

Principal Place of Business

5819 DRIFTWOOD PKWY
CAPE CORAL FL 33904

Mailing Address

5819 DRIFTWOOD PKWY
CAPE CORAL FL 33904-59633. Date Incorporated or Qualified
08/31/19653a. Date of Last Report
02/14/19964. FEI Number
23-7229224Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

LLOYD, THELMA
4907 SW 2ND PLACE
CAPE CORAL FL 33914

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE
NAME PATTERSON, JOAN
STREET ADDRESS 5920 SW 1ST CT
CITY - ST - ZIP CAPE CORAL FLTITLE D ☒ DELETE
NAME LATWINSKI, EDWARD
STREET ADDRESS 2801 SE 17TH PLACE
CITY - ST - ZIP CAPE CORAL FLTITLE DT ☐ DELETE
NAME LLOYD, THELMA
STREET ADDRESS 4907 SW 2ND PLACE
CITY - ST - ZIP CAPE CORAL FLTITLE AT ☐ DELETE
NAME WARKENTIN, RUTH
STREET ADDRESS 2516 SE 22ND AVENUE
CITY - ST - ZIP CAPE CORAL FLTITLE DVP ☐ DELETE
NAME RANDALL, MARGE
STREET ADDRESS 2019 SE 10TH LANE
CITY - ST - ZIP CAPE CORAL FLTITLE S ☐ DELETE
NAME CROSSMAN, ALICE
STREET ADDRESS 1014 SE 43RD TERRACE
CITY - ST - ZIP CAPE CORAL FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE P ☐ Change ☒ Addition
12 NAME CARPENTIER, JOE
13 STREET ADDRESS 619 SE 47th St.
14 CITY - ST - ZIP CAPE CORAL FL21 TITLE VP ☐ Change ☒ Addition
22 NAME CARPENTIER, LEONORA
23 STREET ADDRESS 619 SE 47th St.
24 CITY - ST - ZIP CAPE CORAL FL31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: THELMA LLOYD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thelma Lloyd

Date

1/14/97

Daytime Phone # 941 542 1040

0065028

CR2E037 (9/96)