

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711996

FILED
Mar 10, 2011
Secretary of State

Entity Name: CAPE CORAL ART LEAGUE, INC.

Current Principal Place of Business:

516 CULTURAL PARK BLVD.
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

516 CULTURAL PARK BLVD.
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 23-7348129

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEASLEY, HOLLY A
18449 OLIVE ROAD
FORT MYERS, FL 33967 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRES
Name: WILDMAN, LINDA
Address: 2810 SW 34TH TERRACE
City-St-Zip: CAPE CORAL, FL 33914

Title: VP 1
Name: EWELL, MARJORIE
Address: 3316 SE 22ND PLACE
City-St-Zip: CAPE CORAL, FL 33904

Title: TREA
Name: BEASLEY, HOLLY
Address: 18449 OLIVE ROAD
City-St-Zip: FORT MYERS, FL 33967

Title: VP 2
Name: DALE, GAIL
Address: 15181 SAM SNEAD LANE
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D
Name: WARD, CHRISTY
Address: 1229 SE 3RD STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: D
Name: NELKE, VIRGINIA
Address: 1706 SE10TH PLACE
City-St-Zip: CAPE CORAL, FL 33990

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: HOLLY A. BEASLEY

TREA

03/10/2011

Electronic Signature of Signing Officer or Director

Date