

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000004929 (6)

1. Corporation Name

PALM PATCHERS QUILT CLUB, INC.

APPROVED
AND
FILED

55 MAY -1 AM 9:5

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

P.O. BOX 07345
FT. MYERS FL 33919

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FT. MYERS FL 33919

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/25/1993

3a. Date of Last Report

02/08/1994

4. FBI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

28 Zip

24 Country

29 Country

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐ \$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under Ch. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CRISP, DOROTHY M
11854 ROYAL T. CIRCLE
CAPE CORAL FL 33991

81 Name

ALICE MOHR

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

3861 East River Drive

83

84 City

Ft. Myers

FL

85 Zip Code
33916

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Alice Mohr
Signature, typed or printed name of registering agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

May 3, 1995
Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	MOHR, ALICE
STREET ADDRESS	3861 E. RIVER DR.
CITY - ST - ZIP	FT. MYERS FL 33916
TITLE	D
NAME	DOWNES, MARGE
STREET ADDRESS	1325 CALOOSA VISTA DR.
CITY - ST - ZIP	FT. MYERS FL 33901
TITLE	D
NAME	STERNER ELLA, SCOTTY
STREET ADDRESS	3229 SECOND ST. WEST
CITY - ST - ZIP	LENHIGH FL 33971
TITLE	D
NAME	GRUBER, PEGGY
STREET ADDRESS	5832 WILD FIG LANE, SW
CITY - ST - ZIP	FT. MYERS FL 33919
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	D	☒ Change ☐ Addition
1.2 NAME	JUDI MCCALL	
1.3 STREET ADDRESS	1373 Stadler Street	
1.4 CITY - ST - ZIP	Ft. Myers, FL 33901	
2.1 TITLE	D	☒ Change ☐ Addition
2.2 NAME	ISABELLE ZAKARIAN	
2.3 STREET ADDRESS	6570 Highland Pines Circle	
2.4 CITY - ST - ZIP	Ft. Myers, FL 33912	
3.1 TITLE	D	☒ Change ☐ Addition
3.2 NAME	DONNA KONGSVIK	
3.3 STREET ADDRESS	4408 S.E. 12th Avenue	
3.4 CITY - ST - ZIP	Cape Coral, FL 33914	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

Peggy Gruber
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 5, 1995
Date

Signature Printed Name