FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 MAR 15 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000004929

1. Corporation Name
PALM PATCHERS QUILT CLUB, INC.

Principal Place of Business	Mailing Address
P.O. BOX 07345 FT. MYERS FL 33919	P.O. BOX 07345 FT. MYERS FL 33919

[redacted]

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21	26	10/25/1993
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
VOGLER, INGE 1827 PALACO GRANDE PKWY CAPE CORAL FL 33904	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VOGLER, INGE 5332 DEL PRADO BLVD. CAPE CORAL FL 33904	☒ DELETE	1.1 TITLE P 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition SMITH, LEONA (P) 3680 WOODSTORK CT. S.W. FT. MYERS, FL. 33908-4122
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DONGSVIK, DONNA 4408 S.E. 12TH AVE. CAPE CORAL FL 33904	☒ DELETE	2.1 TITLE T 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition DEYOUNG, CONNIE (V.) 5803 LITTLESTONE CT. N. FT. MYERS, FL. 33903
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PETERS, WYLMA P.O. BOX 3767 N/A N. FT. MYERS FL 33918-4122	☒ DELETE	3.1 TITLE T 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition HORVATH, ANNE (T) 13252 WHITE MARSH LANE UNIT 5 FT MYERS, FL. 33912
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, LEONA 3680 WOODSTORK CT FT MYERS FL 33908-4122	☒ DELETE	4.1 TITLE D 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition REAP, MAY (S) 5905 TRAILWINDS DR. UNIT 816 FT MYERS, FL. 33907
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRUBER, PEGGY 5832 WIL FIG LANE S.W. FORT MYERS FL 33918	☒ DELETE	5.1 TITLE D 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition VOGLER, INGE (D) 1827 PALLACO GRANDE PKWY CAPE CORAL, FL. 33904
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition 2/24/99 901105033 $61.25

CR2E037 (11/98)

14. I 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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 1/14/99 941-481-1141
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #