

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**  
**Mar 03, 1999 8:00 am**  
**Secretary of State**

03-03-1999 90056 027 \*\*\*\*61.25

**DOCUMENT # N96000004138**

1. Corporation Name

**CAPE CORAL QUILTER'S GUILD, INC.**

Principal Place of Business

10708 FIRESTONE COURT  
N. FORT MYERS FL 33903  
US

Mailing Address

10708 FIRESTONE COURT  
N. FORT MYERS FL 33903  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

08/05/1996

4. FEI Number

65-0531408

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing ☐

**\$5.00** May Be  
Added to Fees

9. Name and Address of Current Registered Agent

~~STERNBERG, CLAUDIE~~  
~~10708 FIRESTONE COURT~~  
~~N. FORT MYERS FL 33903~~

10. Name and Address of New Registered Agent

81 Name **PATRICIA BARTKOWSKI**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**2010 NE 2ND TERR**  
83 **CAPE CORAL**  
84 City **FL** 85 Zip Code **33909**

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 *Patricia Bartkowski*

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

(NOTE: Registered Agent signature required when reinstating)

DATE **1/25/99**

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE **PD**  
NAME **STERNBERG, CLAUDIE**  
STREET ADDRESS **10708 FIRESTONE COURT**  
CITY-ST-ZIP **N. FT. MYERS FL 33903**

TITLE **VPD** ☐ DELETE

NAME **JACOBS, MARY ANN**  
STREET ADDRESS **2130 S.W. 39TH TERRACE**  
CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE **SD** ☒ DELETE

NAME **NEIGHBORS, ELAINE**  
STREET ADDRESS **1639 BEACH PRKY UNIT 203**  
CITY-ST-ZIP **CAPE CORAL FL 33904**

TITLE **TD** ☒ DELETE

NAME **STRUZE, CECILIA**  
STREET ADDRESS **5336 S.W. 9TH PLACE**  
CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME **RUSTY BOTTA SD**  
3.3 STREET ADDRESS **2811 6th ST**  
3.4 CITY-ST-ZIP **W LEHIGH ACRES FL 33971**

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME **PATRICIA BARTKOWSKI TD**  
4.3 STREET ADDRESS **2010 NE 2nd Terr**  
4.4 CITY-ST-ZIP **CAPE CORAL, FL 33909**

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 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: *Patricia Bartkowski*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE **1/25/99**

DAYTIME PHONE # **941-573-6337**

CR2E037 (11/98)