

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 21, 2001 8:00 am
Secretary of State

05-17-2001 91292 014 ****61.25

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1. Entity Name

CAPE CORAL QUILTER'S GUILD, INC.

Principal Place of Business

Mailing Address

2010 NE 2ND TERRACE
 CAPE CORAL FL 33909
 US

2010 NE 2ND TERRACE
 CAPE CORAL FL 33909
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0531408

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

BARTKOWSKI, PATRICIA
 2010 NE 2ND TERR
 CAPE CORAL FL 33909

8. 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 *Patricia Bartkowski*

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

(NOTE: Registered Agent signature required when reinstating)

4/29/2001

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
 NAME JACOBS, MARY ANN
 STREET ADDRESS 2130 SW 39TH TERRACE
 CITY-ST-ZIP CAPE CORAL FL 33914-5405 ☐ Delete

TITLE VP
 NAME BARTKOWSKI, PATRICIA
 STREET ADDRESS 2010 NE 2ND TERRACE
 CITY-ST-ZIP CAPE CORAL FL 33909 ☐ Delete

TITLE SD
 NAME CRAWFORD, JOYCE
 STREET ADDRESS 1425 WELLINGTON COURT
 CITY-ST-ZIP CAPE CORAL FL 33904 ☐ Delete

TITLE TD
 NAME SCHLEIG, PATTI
 STREET ADDRESS 1918 SE EVEREST PARKWAY
 CITY-ST-ZIP CAPE CORAL FL 33904 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE D President
 NAME Patricia Bartkowski
 STREET ADDRESS 2010 NE 2nd Terr.
 CITY-ST-ZIP CAPE CORAL FL 33904 ☒ Change ☐ Addition

TITLE D VP
 NAME Mary Ann Jacobs
 STREET ADDRESS 2130 SW 39th Terr.
 CITY-ST-ZIP CAPE CORAL, FL 33914 ☒ Change ☐ Addition

TITLE D Secy.
 NAME Valeria Bukowski
 STREET ADDRESS 1810 SE 44th St.
 CITY-ST-ZIP CAPE CORAL FL 33904 ☒ Change ☐ Addition

TITLE D CAROL ROSE
 NAME
 STREET ADDRESS 5331 Congo Court
 CITY-ST-ZIP CAPE CORAL, FL 33904 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 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

5/29/2001
 Date

Daytime Phone #

CR2E037 (10/00)