

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 10, 2004 8:00 am
Secretary of State

03-10-2004 90017 018 ****70.00

DOCUMENT # 710356					
1. Entity Name SANIBEL PUBLIC LIBRARY, INC.					
Principal Place of Business 770 DUNLOP ROAD Road SANIBEL, FL 33957			Mailing Address 770 DUNLOP ROAD Road SANIBEL, FL 33957		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-6200187	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
ALLEN, PATRICIA J 770 DUNLOP ROAD SANIBEL, FL 33957				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P	<input type="checkbox"/> Delete		TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOOPER, JAMES			NAME	Tom Krekel
STREET ADDRESS	5280 LADYFINGER LAKE RD			STREET ADDRESS	760 Nerita Street
CITY-ST-ZIP	SANIBEL, FL 33957			CITY-ST-ZIP	Sanibel FL 33957
TITLE	D	<input type="checkbox"/> Delete		TITLE	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KYLE, WILLIAM			NAME	Richard Hulit
STREET ADDRESS	1090 SKIFF PLACE			STREET ADDRESS	800 Limpet Drive
CITY-ST-ZIP	SANIBEL, FL 33957			CITY-ST-ZIP	Sanibel FL 33957
TITLE	V	<input type="checkbox"/> Delete		TITLE	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KREKEL, TOMAS			NAME	Kenneth Nirenberg
STREET ADDRESS	760 NERITA STREET			STREET ADDRESS	15981 Nelson's Court
CITY-ST-ZIP	SANIBEL, FL 33957			CITY-ST-ZIP	Fort Myers FL 33908
TITLE	S	<input type="checkbox"/> Delete		TITLE	
NAME	CAMPBELL, KATHLEEN			NAME	
STREET ADDRESS	1787 SERENITY LANE			STREET ADDRESS	
CITY-ST-ZIP	SANIBEL, FL 33957			CITY-ST-ZIP	
TITLE	D	<input type="checkbox"/> Delete		TITLE	
NAME	HUDSON, JANE			NAME	
STREET ADDRESS	1342 SAND CASTLE ROAD			STREET ADDRESS	
CITY-ST-ZIP	SANIBEL, FL 33957			CITY-ST-ZIP	
TITLE	T	<input type="checkbox"/> Delete		TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BASSETT, PRESTON			NAME	Karl Johns
STREET ADDRESS	1155 SAND CASTEL ROAD			STREET ADDRESS	3273 Twin Lakes Lane
CITY-ST-ZIP	SANIBEL, FL 33957			CITY-ST-ZIP	Sanibel FL 33957
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: <u>Tom Krekel</u> Tom Krekel, President					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date</small>					
<small>Daytime Phone #</small>					

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02182004 Chg-NP CR2E037 (10/03)

4. FEI Number 59-6200187 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS			
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STREET ADDRESS	1155 SAND CASTEL ROAD		
CITY-ST-ZIP	SANIBEL, FL 33957		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
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NAME	Tom Krekel		
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CITY-ST-ZIP	Sanibel FL 33957		
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	Richard Hulit		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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CITY-ST-ZIP			
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	Karl Johns		
STREET ADDRESS	3273 Twin Lakes Lane		
CITY-ST-ZIP	Sanibel FL 33957		

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SIGNATURE: Tom Krekel Tom Krekel, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date
Daytime Phone #