

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011541

FILED
Jan 13, 2006
Secretary of State

Entity Name: SANIBEL SEA SCHOOL, INC.

Current Principal Place of Business:

546 HIDEAWAY CT.
SANIBEL, FL 33957

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1229
SANIBEL, FL 339571229

New Mailing Address:

FEI Number: 20-3684133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOBCZAK, CHARLIE
1149 PERIWINKLE WAY
SANIBEL, FL 33957 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NEILL, J. BRUCE
Address: 54 BURKEWOOD RD.
City-St-Zip: MT. VERNON, NY 10552

Title: SD () Delete
Name: NEILL, EVELYN MONROE
Address: 54 BURKEWOOD RD.
City-St-Zip: MT. VERNON, NY 10552

Title: D () Delete
Name: SHERMAN, HOWARD
Address: 65 WASHINGTON ST., APT. 6D
City-St-Zip: BROOKLYN, NY 11201

Title: D () Delete
Name: ROSENFELD, JEAN CONLAN
Address: 711 AMSTERDAM AVE., APT. 17N
City-St-Zip: NEW YORK, NY 10025

Title: D () Delete
Name: THAYER, VICTORIA G
Address: 602 DANCER CT.
City-St-Zip: BEAUFORT, NC 28516

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES BRUCE NEILL

PD

01/13/2006

Electronic Signature of Signing Officer or Director

Date