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Apr 10 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # P94000044622 (6)

1. Corporation Name
SANIBEL ISLAND PROVISIONERS, INC.

Principal Place of Business
1633 PERIWINKLE WAY SUITE A
SANIBEL FL 33957

Mailing Address
1633 PERIWINKLE WAY SUITE A
SANIBEL FL 33957-4404

3. Date Incorporated or Qualified 06/10/1994
3a. Date of Last Report 04/30/1996

2. Principal Place of Business
21 2075 Periwinkle Way
Suite, Apt. #, etc. # 14

2a. Mailing Address
26 2075 Periwinkle Way
Suite, Apt. #, etc. # 14

4. FEI Number 65-0511274
Applied For Not Applicable

22 City & State Sanibel, FL

27 City & State Sanibel, FL

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

23 Zip 33957 Country USA

29 Zip 33957 Country USA

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
MURTY, TIMOTHY J
1633 PERIWINKLE WAY SUITE A
SANIBEL FL 33957

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when retreating) DATE

Table with 12 rows and 2 columns: OFFICERS AND DIRECTORS. Columns include TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETE checkbox. Rows 1 and 2 are filled with ERICKSON, C T and BUSH, GREGORY.

Table with 12 rows and 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns include 1.1-1.4 and 2.1-2.4, 3.1-3.4, 4.1-4.4, 5.1-5.4, 6.1-6.4, and checkboxes for Change and Additio. Includes handwritten initials 'RW' and '4-10-97'.

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] 2/25/97 741 472 2525
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0404260