

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713554

FILED  
Jan 03, 2005  
Secretary of State

**Entity Name:** SANIBEL - CAPTIVA CONSERVATION FOUNDATION, INC.

**Current Principal Place of Business:**

3333 SANIBEL-CAPTIVA ROAD  
P.O. BOX 839  
SANIBEL, FL 339570839

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 839  
SANIBEL, FL 339570839

**New Mailing Address:**

**FEI Number:** 59-1205087

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LINDBLAD, ERICK  
3333 SANIBEL-CAPTIVE ROAD  
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: ST ( ) Delete  
Name: SCHWAB, WARREN  
Address: 1225 SAND CASTLE RD.  
City-St-Zip: SANIBEL, FL 33957

Title: TT ( ) Delete  
Name: AVERY, BRUCE  
Address: 722 GOPHER WALK WAY  
City-St-Zip: SANIBEL, FL 33957

Title: VPT ( ) Delete  
Name: HILLEBRANDT, WILLIAM  
Address: 1355 EAGLE RUN DR  
City-St-Zip: SANIBEL, FL 33957

Title: PT ( ) Delete  
Name: BALL, ARMAND  
Address: 1351 MIDDLE GULF DR.  
City-St-Zip: SANIBEL, FL 33957

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: VPT (X) Change ( ) Addition  
Name: FRESE, JANIE  
Address: 2058 WILD LIME DRIVE  
City-St-Zip: SANIBEL, FL 33957

Title: PT (X) Change ( ) Addition  
Name: HILLEBRANDT, WILLIAM  
Address: 1355 EAGLE RUN DRIVE  
City-St-Zip: SANIBEL, FL 33957

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BRUCE AVERY

TT

01/03/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date