

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 725577

**Entity Name:** SANIBEL ISLES-WATER SHADOWS CIVIC IMPROVEMENT ASSOCIATION, INC.

**FILED**  
**Feb 07, 2017**  
**Secretary of State**  
**CC7805660781**

**Current Principal Place of Business:**

1740 JEWEL BOX DR.  
SANIBEL, FL 33957

**Current Mailing Address:**

1663 HIBISCUS DRIVE  
SANIBEL, FL 33957 US

**FEI Number: 59-1673335**

**Certificate of Status Desired: No**

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

FOWLER, DAVID K  
1648 PERIWINKLE WAY  
SANIBEL, FL 33957 US

*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

**Officer/Director Detail :**

Title SECRETARY  
Name TOWNSLEY, SCOTT  
Address 1657 VENUS DRIVE  
City-State-Zip: SANIBEL FL 33957

Title PRESIDENT  
Name JERRETT, STEVE  
Address 1740 JEWEL BOX DR  
City-State-Zip: SANIBEL FL 33957

Title TREASURER  
Name ORR, ROBERT  
Address 1663 HIBISCUS DRIVE  
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR  
Name ROBERTS, JOHN  
Address 1769 VENUS DRIVE  
City-State-Zip: SANIBEL FL 33957

*I hereby 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 all other like empowered.*

SIGNATURE: ROBERT B. ORR, JR.

TREASURER

02/07/2017

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date