

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011541

Entity Name: SANIBEL SEA SCHOOL, INC.

Current Principal Place of Business:

455 PERIWINKLE WAY
SANIBEL, FL 33957

Current Mailing Address:

P.O. BOX 1229
SANIBEL, FL 33957

FEI Number: 20-3684133

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NEILL, JAMES BRUCE
9440 COTTEN CT
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: JAMES B. NEILL

03/08/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name MARINELLO, MARK
Address 1028 BAYVIEW DRIVE
City-State-Zip: SANIBEL FL 33957

Title PRESIDENT
Name KHAKEE, NIK
Address 410 CENTRAL PARK WEST, APT. 10AB
City-State-Zip: NEW YORK NY 10025

Title DIRECTOR
Name NEILL, J. BRUCE PH.D.
Address 9440 COTTEN COURT
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR
Name NEILL, EVELYN MONROE
Address 9440 COTTEN COURT
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR
Name MASSIE, CHARLES
Address 15671 SAN CARLOS BLVD SUITE 201
City-State-Zip: FORT MYERS FL 33908

Title SECRETARY
Name O'KONSKI, JODY
Address 799 CAPE VIEW DRIVE
City-State-Zip: FORT MYERS FL 33957

Title DIRECTOR
Name SUMMITT, MARK
Address 1807 BOWMANS BEACH ROAD
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR
Name ROACH, CHARLES (CHIP)
Address 558 LIGHTHOUSE WAY
City-State-Zip: SANIBEL FL 33957

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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: J. BRUCE NEILL

EXECUTIVE DIRECTOR

03/08/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MCMILLEN, JENNIFER
Address 1667 MCGREGOR RESERVE DR.
City-State-Zip: FORT MYERS FL 33901

Title DIRECTOR
Name SCHWARTZEL-RIENZO, JODI
Address 1205 WALDEN DR
City-State-Zip: FORT MYERS FL 33901

Title DIRECTOR
Name GIORDANI, ROSEANNE
Address 5853 PINE TREE DRIVE
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR
Name ARNHEITER, MICHAEL
Address 1152 BUTTONWOOD LANE
City-State-Zip: SANIBEL FL 33957

Title DIRECTOR
Name SULLIVAN, JENNA
Address 1983 NW ESTAVIEW DR
City-State-Zip: CORVALLIS OR 97330

Title DIRECTOR
Name GREY, JOHN
Address 2 GLENVIEW MANOR DRIVE
City-State-Zip: FORT MYERS BEACH FL 33931