2019 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

Name and Address of Current Registered Agent:

NEILL, JAMES BRUCE 9440 COTTEN CT SANIBEL, FL 33957 US Certificate of Status Desired: Yes

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		04/05/2019				
	Electronic Signature of Registered Agent		Date				
Officer/Director Detail :							
Title	VP	Title	PRESIDENT				
Name	MARINELLO, MARK	Name	KHAKEE, NIK				
Address	1532 ANGEL DRIVE	Address	410 CENTRAL PARK WEST, APT. 10A				
City-State-Zip:	SANIBEL FL 33957	City-State-Zip:	NEW YORK NY 10025				
Title Name Address City-State-Zip: Title Name Address City-State-Zip:	DIRECTOR NEILL, J. BRUCE PH.D. 9440 COTTEN COURT SANIBEL FL 33957 DIRECTOR O'KONSKI, JODY 799 CAPE VIEW DRIVE FORT MYERS FL 33919	Title Name Address City-State-Zip: Title Name Address City-State-Zip:	DIRECTOR SUMMITT, MARK 1807 BOWMANS BEACH ROAD				
Title Name Address City-State-Zip:	DIRECTOR ROACH, CHARLES (CHIP) 558 LIGHTHOUSE WAY SANIBEL FL 33957	Title Name Address City-State-Zip:	DIRECTOR MCMILLEN, JENNIFER 212 HILLCREST DRIVE				

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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: NEILL, J. BRUCE PH.D.

EXECUTIVE DIRECTOR 04/05/2019

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 05, 2019 Secretary of State 4043053038CC

Officer/Director Detail Continued :

Title	SECRETARY	Title	DIRECTOR
Name	SCHWARTZEL-RIENZO, JODI	Name	SULLIVAN, JENNA M
Address	1205 WALDEN DRIVE	Address	1983 NW ESTAVIEW DR
City-State-Zip:	FORT MYERS FL 33901	City-State-Zip:	CORVALLIS OR 97330
Title	DIRECTOR	Title	DIRECTOR
Name	GIORDANI, ROSEANNE	Name	GREY, JOHN
Address	4007 IDLEWILD ROAD	Address	2 GLENVIEW MANOR DRIVE
City-State-Zip:	AUSTIN TX 78731	City-State-Zip:	FORT MYERS BEACH FL 33931
Title	DIRECTOR	Title	DIRECTOR
Name	SZYMANCZYK, CHRISTINE	Name	FISCHER, SCOTT
Address	1503 SAN CARLOS BAY DRIVE	Address	8532 SOUTHWIND BAY CIRCLE
City-State-Zip:	SANIBEL FL 33957	City-State-Zip:	FORT MYERS FL 33908
Title	DIRECTOR	Title	DIRECTOR
Name	DICARLO, DANA	Name	HORVATH, MICHAEL
Address	28 CHARLCOTE PLACE	Address	125 EAST WHEELOCK STREET
City-State-Zip:	BALTIMORE MD 21218	City-State-Zip:	HANOVER NH 03755