

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 705163

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** SANIBEL COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

2173 PERIWINKLE WAY  
SANIBEL, FL 33957

**New Principal Place of Business:**

**Current Mailing Address:**

2173 PERIWINKLE WAY  
SANIBEL, FL 33957

**New Mailing Address:**

**FEI Number:** 59-1060466

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KOBE, JILL  
2173 PERIWINKLE WAY  
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: PD  
Name: MEEK, MARGE  
Address: 712 GOPHER WALK WAY  
City-St-Zip: SANIBEL, FL 33957

Title: VPD  
Name: KELLY, MIKE  
Address: P.O. BOX 548  
City-St-Zip: CAPTIVA, FL 33924

Title: SD  
Name: SCHECKER, BILL  
Address: 9416 ARUM COURT  
City-St-Zip: SANIBEL, FL 33957

Title: TD  
Name: SAMLER, JACK  
Address: 1410 SAND CASTLE WAY  
City-St-Zip: SANIBEL, FL 33957

Title: MGT  
Name: KOBE, JILL  
Address: 2173 PERIWINKLE WAY  
City-St-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: JILL KOBE

EXD

04/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date