

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710356

FILED
Apr 25, 2008
Secretary of State

Entity Name: SANIBEL PUBLIC LIBRARY FOUNDATION, INC.

Current Principal Place of Business:

770 DUNLOP ROAD
SANIBEL, FL 33957

New Principal Place of Business:

Current Mailing Address:

770 DUNLOP ROAD
SANIBEL, FL 33957

New Mailing Address:

FEI Number: 59-6200187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, PATRICIA J
770 DUNLOP ROAD
SANIBEL, FL 33957 US

Name and Address of New Registered Agent:

MOHUNDRO, MARGARET C
770 DUNLOP ROAD
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: MARGARET C MOHUNDRO

04/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: KREKEL, TOM
Address: 760 NERITA STREET
City-St-Zip: SANIBEL, FL 33957

Title: V () Delete
Name: NIRENBERG, KENNETH
Address: 15981 NELSONS CT
City-St-Zip: FORT MYERS, FL 33908

Title: T () Delete
Name: NIRENBERG, KENNETH
Address: 15981 NELSON'S COURT
City-St-Zip: FORT MYERS, FL 33908

Title: P () Delete
Name: ROBINSON, LINDA
Address: 2659 WEST GULF DR B102
City-St-Zip: SANIBEL, FL 33957

Title: D () Delete
Name: EDGAR, TOM
Address: 1451 SAND CASTLE RD
City-St-Zip: SANIBEL, FL 33957

Title: D (X) Delete
Name: ALLEN, PATRICIA
Address: 4279A ISLAND CIR
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NIRENBERG, KENNETH
Address: 15981 NELSONS CT
City-St-Zip: FORT MYERS, FL 33908

Title: D (X) Change () Addition
Name: UHLER, LINDA
Address: 770 DUNLOP ROAD
City-St-Zip: SANIBEL, FL 33957

Title: D (X) Change () Addition
Name: MOHUNDRO, MARGARET
Address: 770 DUNLOP ROAD
City-St-Zip: SANIBEL, FL 33957

Title: D (X) Change () Addition
Name: ROBINSON, LINDA
Address: 2659 WEST GULF DR B102
City-St-Zip: SANIBEL, FL 33957

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARGARET C MOHUNDRO

D

04/25/2008

Electronic Signature of Signing Officer or Director

Date