## 2003 NOT-FOR-PROFIT CORPORATION

## Apr 21, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR)** Secretary of State **DOCUMENT # 713554** 04-21-2003 90458 041 \*\*\*\*61.25 SANIBEL - CAPTIVA CONSERVATION FOUNDATION, INC. Principal Place of Business Mailing Address 3333 SANIBEL-CAPTIVA ROAD P O BOX 839 11002260 SANIBEL FL 33957-0839 P.O. BOX 839 SANIBEL FL 33957-0839 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 59-1205087 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LINDBLAD, ERICK Street Address (P.O. Box Number is Not Acceptable) 3333 SANIBEL-CAPTIVE ROAD SANIBEL FL 33957 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. ne of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees -Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS X Addition TITLES Delete TITLE ☐ Change Schwab, Warren LE GETTE, CAROLINE NAME NAME 1225 Sand Castle Rd. STREET ADDRESS 600 N YACHTSMAN DR STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP Sanibel, 7L 33957 Sanibel FL 33957 **Addition** TITLE ☐ Change TITLE Delete ALBERT, CRAIG NAME NAME 722 Gopher Walk Way STREET ADDRESS 2407\_PERIWINKLE\_WAY \_. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SANIBEL FL 33957 FL 33957 <u>Sanibal</u> Delete **X** Addition TITLE ☐ Change Ball, Armand GIBSON, RON NAME NAME 1351 Middle Guif Dr PO BOX 456 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Captiva Fl. 33924 <u>Sanibel</u>, 7L 33957 Addition Delete TITLE ☐ Change Skaugstad . Dean 3851 Coquina Dr MEEK, MARGE NAME NAME STREET ADDRESS 712 GOPHER WALK WAY STREET ADDRESS CITY-ST-ZIP Sanibel 7L 33957 CITY-ST-ZIP sanibel fl 33957 ☐ Delete TITLE ☐ Change ☐ Addition TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

NAME

SIGNATURE:

NAME

STREET ADDRESS

14103

472-2329

**FILED**