

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 09, 2006 8:00 am**  
**Secretary of State**

02-09-2006 90049 009 \*\*\*\*61.25

**DOCUMENT # 721988**

1. Entity Name

SANIBEL-CAPTIVA LIONS CLUB, INC.



Principal Place of Business

P.O. BOX 391  
SANIBEL FL 33957

Mailing Address

P.O. BOX 391  
SANIBEL FL 33957

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

23-7151632

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

NACHAZEL, JOHN T  
15248 TAMiami TRAIL  
STE 500  
FORT MYERS FL 33908

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE SD ☒ Delete  
NAME NACHAZEL, THOMAS W  
STREET ADDRESS PO BOX 7789  
CITY-ST-ZIP SANIBEL FL 33957

TITLE D ☐ Delete  
NAME KREKEL, THOMAS  
STREET ADDRESS 760 NERITA ST  
CITY-ST-ZIP SANIBEL FL 33957

TITLE VD ☒ Delete  
NAME NOLAN, CLIFF  
STREET ADDRESS 780 ELINOR WAY  
CITY-ST-ZIP SANIBEL FL 33957

TITLE TD ☐ Delete  
NAME HUGH, CAMERON M  
STREET ADDRESS 527 E GULF DR  
CITY-ST-ZIP SANIBEL FL 33957

TITLE PD ☒ Delete  
NAME SAMLER, JACK  
STREET ADDRESS 1410 SAND CASTLE RD  
CITY-ST-ZIP SANIBEL FL 32957

TITLE D ☐ Delete  
NAME GRAHAM, JAMES B  
STREET ADDRESS 3256 TWIN LAKES LN  
CITY-ST-ZIP SANIBEL FL 33957

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Change ☒ Addition  
NAME Nolan Cliff  
STREET ADDRESS 780 Elinor Way  
CITY-ST-ZIP Sanibel FL 33957

TITLE VD ☐ Change ☒ Addition  
NAME Morley John  
STREET ADDRESS 604 Sea Oats Drive  
CITY-ST-ZIP Sanibel FL 33957

TITLE SD ☐ Change ☒ Addition  
NAME Utner Ronald  
STREET ADDRESS 750 Nerita St.  
CITY-ST-ZIP Sanibel FL 33957

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE: *Hugh M. Cameron* *Hugh M. Cameron* 1/27/06 239 422 5981