

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 30, 2006
Secretary of State

DOCUMENT# 764982

Entity Name: SANIBEL & CAPTIVA ISLANDS ASSOCIATION OF REALTORS, INC.**Current Principal Place of Business:**1648 PERIWINKLE WAY
STE. F
SANIBEL, FL 33957**New Principal Place of Business:****Current Mailing Address:**1648 PERIWINKLE WAY
STE. F
SANIBEL, FL 33957**New Mailing Address:****FEI Number:** 59-2696345**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BANKER, NANCY AE
1648 PERIWINKLE WAY
STE. F
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:** P () Delete
Name: CORACE, ARTHUR
Address: 1648 PERIWINKLE WAY, STE F
City-St-Zip: SANIBEL, FL 33957**Title:** T () Delete
Name: VENTURA, MARCEL
Address: 1648 PERIWINKLE WAY, #F
City-St-Zip: SANIBEL, FL 33957**Title:** S () Delete
Name: CUSCADEN, KARA
Address: 1648 PERIWINKLE WAY, #F
City-St-Zip: SANIBEL, FL 33957**Title:** PE () Delete
Name: OCHESTER, RAY
Address: 1648 PERIWINKLE WAY, #F
City-St-Zip: SANIBEL, FL 33957**Title:** D () Delete
Name: SCHULDENFREI, DAVID
Address: 1648 PERIWINKLE WAY, #F
City-St-Zip: SANIBEL, FL 33957**Title:** D () Delete
Name: HALL, JIM
Address: 1648 PERIWINKLE WAY, #F
City-St-Zip: SANIBEL, FL 33957**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** T (X) Change () Addition
Name: SAMLER, JACK
Address: 1648 PERIWINKLE WAY, #F
City-St-Zip: SANIBEL, FL 33957**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**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 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: NANCY BANKER

AE

08/30/2006

Electronic Signature of Signing Officer or Director

Date