

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F99230 (7)

1. Corporation Name

SANIBEL & CAPTIVA ISLANDS MULTIPLE LISTING SERV
CE, INC. *INALIS*



Principal Place of Business

695 TARPON BAY RD 10
SANIBEL FL 33957

Mailing Address

695 TARPON BAY RD 10
SANIBEL FL 33957

3. Date Incorporated or Qualified
09/13/1982

3a. Date of Last Report
03/24/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-2301841

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WINER, STEVEN I.
ONE UNIVERSITY PARK #600
12800 UNIVERSITY DRIVE
FT. MYERS FL 33907

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

EVP
BUCHMAN, DENISE A
695 TARPON BAY RD. #10
SANIBEL FL 33957

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VP
SAMPLER, JACK
1147 PERIWINKLE WAY
SANIBEL FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

SD
LAPI, ANGELINE
P.O. BOX 57 NA
SANIBEL FL 33957

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VP
ONDARCHO, ROSANNE
1509 PERIWINKLE WAY
SANIBEL FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

P
SCHULDENFREI, DAVID L
1509 PERIWINKLE WAY
SANIBEL FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
NOVELLI, JOANNE
1509 PERIWINKLE WAY
SANIBEL FL

☒ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

M

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

P

☒ Change ☐ Addition

695 Tarpon Bay Rd #10

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☒ Change ☐ Addition

695 Tarpon Bay Rd #10

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

VP

☒ Change ☐ Addition

Bailey, Mary Lou.
695 Tarpon Bay Rd #10
33957

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

D

☒ Change ☐ Addition

395 Tarpon Bay Rd #10

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

T.D.

☒ Change ☐ Addition

Smith, John
695 Tarpon Bay Rd #10
33957

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Denise Buchman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/96
Date

941/472-9353
Telephone #

CR2E034 (12/95)