## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G91268

1526 4TH ST. SOUTH

NAPLES, FL 34102

Address: City-St-Zip: SANIBEL REMODELING, INC.

FILED Jan 14, 2009 Secretary of State

Entity Nai	me: SANIBEL	. REMODELING, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
1526 4TH NAPLES, I	ST. SOUTH FL 34102				
Current Mailing Address:			New Mailing Address:		
1526 4TH NAPLES, I	ST. SOUTH FL 34102				
FEI Number	: 59-2384718	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
1526 4TĤ NAPLES, I		JS		d office or registered agent or both	
	e named entity e of Florida.	submits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			nt	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( HARRIS, JOHN 1526 4TH ST. 3 NAPLES, FL 3	SOUTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD ( HARRIS, ELLE 1526 4TH ST. : NAPLES, FL 3	SOUTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	SD ( HARRIS, JOHN	) Delete I H	Title: Name:	( ) Change ( ) Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: JOHN LOUIS HAHHIS PD 01/14/2009