2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M35692

1. Entity Name
SANIBEL INVESTMENT COMPANY

Principal Place of Business	Mailing Address
155 SOUTH MIAMI AVE 9TH FLOOR MIAMI, FL 33130 US	6399 SW 100 ST MIAMI, FL 33156 US

DO NOT WRITE IN THIS SPACE

03162008   No Chg-P   CR2E034 (11/05)

4. FEI Number 59-2698535	Applied For
	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ADAMS, WADE
155 SOUTH MIAMI AVE
9TH FLOOR
MIAMI, FL 33130

DO NOT WRITE IN THIS SPACE

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 $150.00 **After May 1, 2008 Fee will be $550.00**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10. OFFICERS AND DIRECTORS

TITLE	D President
NAME	ADAMS, R. WADE
STREET ADDRESS	6399 SW 100TH ST
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	D Vice-President
NAME	ADAMS, RICHARD B
STREET ADDRESS	6399 SW 100TH ST
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _R. WADE Adams_   3/27/08   305-205-5222

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #