

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

**FILED**  
**Feb 16, 2006 8:00 am**  
**Secretary of State**

02-16-2006 90047 029 \*\*\*\*61.25

**DOCUMENT # N00000001697**

1. Entity Name

**SANIBEL ISLAND FISHING CLUB, INC.**



Principal Place of Business

**2172 PERIWINKLE WAY  
SANIBEL ISLAND FL 33957**

Mailing Address

**PO BOX 989  
SANIBEL ISLAND FL 33957**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**NO-T APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FRANKWICH, VERNON T TREASUR  
6014 WHITE HERON LN  
SANIBEL ISLAND FL 33957**

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 **D** ☐ Delete  
NAME **SOBCZAK, CHARLES**  
STREET ADDRESS **2560 SANIBEL BLVD.**  
CITY-ST-ZIP **SANIBEL FL 33957**

TITLE **D** ☐ Delete  
NAME **FRANKWICH, VERNON T**  
STREET ADDRESS **6014 WHITE HERON LANE**  
CITY-ST-ZIP **SANIBEL FL 33957**

TITLE **D** ☐ Delete  
NAME **VERTESCH, KEVIN**  
STREET ADDRESS **1056 S. YACHTS MAN DR.**  
CITY-ST-ZIP **SANIBEL FL 33957**

TITLE **D** ☐ Delete  
NAME **BOYLE, LES**  
STREET ADDRESS **1019 WINDGREN BLVD**  
CITY-ST-ZIP **SANIBEL FL 33957**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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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: Vernon T. Frankwich VERNON T. FRANKWICH 2/14/06 239-395-7614**