

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003939

FILED
Apr 27, 2009
Secretary of State

Entity Name: SANIBEL-CAPTIVA REVIEW, INC.

Current Principal Place of Business:

1036 WHISPERWOOD
SANIBEL, FL 33957

New Principal Place of Business:

Current Mailing Address:

C/O JOHN M. WICKER, P.A.
P.O. DRAWER 60205
FORT MYERS, FL 33906

New Mailing Address:

FEI Number: 65-1018330

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHN M. WICKER, P.A.
12670 NEW BRITTANY BLVD.
SUITE 101
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

WICKER, JOHN M
12670 NEW BRITTANY BLVD.
SUITE 101
FORT MYERS, FL 33907 US

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: JOHN M. WICKER

04/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JONES, JOHN
Address: 521 LAKE MUREX CIRCLE
City-St-Zip: SANIBEL, FL 33957

Title: D () Delete
Name: ANHOLT, BETTY
Address: 3064 POINCIANA CIRCLE
City-St-Zip: SANIBEL, FL 33957

Title: D () Delete
Name: FLEMING, GINNY
Address: 1036 WHISPERWOOD WAY
City-St-Zip: SANIBEL, FL 33957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JOHN JONES

D

04/27/2009

Electronic Signature of Signing Officer or Director

Date