# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Aug 24, 2004**
**Secretary of State**

DOCUMENT# N02000008706

**Entity Name:** EARTH CHARTER OF SANIBEL, INC.

**Current Principal Place of Business:**

POST OFFICE BOX 872
SANIBEL, FL 33957

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 872
SANIBEL, FL 33957

**New Mailing Address:**

**FEI Number: 27-6543229** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WORKMAN, JUDITH A
408 OLD TRAIL ROAD
SANIBEL, FL 33957 US

**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: ROBERTS, DONNA
Address: 1782 SERENITY LANE
City-St-Zip: SANIBEL, FL 33957

Title: VD ( ) Delete
Name: GARGANO, MARIE
Address: 1271 ISABEL DRIVE
City-St-Zip: SANIBEL, FL 33957

Title: SD ( ) Delete
Name: DENHAM, SUE
Address: 613 LAKE MUREX CIRCLE
City-St-Zip: SANIBEL, FL 33957

Title: TD ( ) Delete
Name: ROTHMAN, THOMAS
Address: 431 RABBIT ROAD
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:

Title: TD (X) Change ( ) Addition
Name: CARTER, SUSAN
Address: 541 LAKE MUREX CIRCLE
City-St-Zip: SANIBEL, FL 33957

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DONNA ROBERTS PD 08/24/2004

Electronic Signature of Signing Officer or Director — Date