

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006546

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** THE SANIBEL HISTORICAL MUSEUM AND VILLAGE INC.

**Current Principal Place of Business:**

950 DUNLOP RD.  
SANBEL, FL 339574017

**New Principal Place of Business:**

**Current Mailing Address:**

950 DUNLOP RD.  
SANBEL, FL 339574017

**New Mailing Address:**

**FEI Number:** 14-2003090

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WERNER, ALEXANDER F  
401 TIRREE CIRCLE  
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: P ( ) Delete  
Name: WERNER, ALEXANDER F JR  
Address: 401 TIRREE CIRCLE  
City-St-Zip: SANIBEL, FL 33957

Title: V ( ) Delete  
Name: PENCE, GAYLE  
Address: 1150 SABAL STREET  
City-St-Zip: SANIBEL, FL 33957

Title: T ( ) Delete  
Name: VARTDAL, ROBERT  
Address: 950 DUNLOP ROAD  
City-St-Zip: SANIBEL, FL 33957

Title: S ( ) Delete  
Name: THEISS, HAL  
Address: 1356 TAHITI DR.  
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: ( ) 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: ALEXANDER F. WERNER

PRES

04/14/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date