

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17081

FILED
Jan 29, 2009
Secretary of State

Entity Name: SHELL MUSEUM AND EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business:

3075 SANIBEL-CAPTIVA RD.
SANIBEL, FL 33957 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1580
SANIBEL, FL 33957 US

New Mailing Address:

FEI Number: 59-2775992

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEAL, JOSE H
3075 SANIBEL-CAPTIVA RD.
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: TD () Delete
Name: PYLE, RICHARD E
Address: 2407 PERIWINKLE WAY SUITE 7
City-St-Zip: SANIBEL, FL 33957

Title: PD () Delete
Name: JOFFE, ANNE
Address: 1163 KITTIWAKE CIRCLE
City-St-Zip: SANIBEL, FL 33957

Title: VD () Delete
Name: SCHMELZ, GARY
Address: 5575 DOGWOOD WAY SW
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: SCHMELZ, GARY
Address: 5575 DOGWOOD WAY SW
City-St-Zip: NAPLES, FL 34116

Title: VD (X) Change () Addition
Name: LAI, ELLEN
Address: 18478 GERANIUM ROAD
City-St-Zip: FORT MYERS, FL 33967

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: JOSE H. LEAL

DR.

01/29/2009

Electronic Signature of Signing Officer or Director

Date