

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45945

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: ESTERO ISLAND HISTORIC SOCIETY, INC.

**Current Principal Place of Business:**

161 BAY RD  
BAYSTREET  
FT MYERS BEACH, FL 33931 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 2815  
FT MYERS BEACH, FL 33932 US

**New Mailing Address:**

FEI Number: 65-0310739      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SANTINI, FRAN  
191 PRIMO DR  
FORT MYERS BEACH, FL 33931 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: RECKWERDT, TED

Address: 274 CURLEW ST

City-St-Zip: FORT MYERS BEACH, FL 33931

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition

Name:

Address:

City-St-Zip:

Title: T ( ) Delete

Name: SANTINI, FRAN

Address: 191 PRIMO DR

City-St-Zip: FORT MYERS BEACH, FL 33931

Title: ( ) Change ( ) Addition

Name:

Address:

City-St-Zip:

Title: S ( ) Delete

Name: DAVIS, SHIRLEY

Address: 8000 LAGOON RD

City-St-Zip: FORT MYERS BEACH, FL 33931

Title: ( ) Change ( ) Addition

Name:

Address:

City-St-Zip:

Title: V ( ) Delete

Name: HOMMERDING, LEROY

Address: 2755 ESTERO BLVD

City-St-Zip: FORT MYERS BEACH, FL 33931

Title: ( ) Change ( ) Addition

Name:

Address:

City-St-Zip:

Title: D ( ) Delete

Name: HUGHES, JO

Address: 17624 OSPREY INLET CT

City-St-Zip: FORT MYERS BEACH, FL 33908

Title: ( ) Change ( ) Addition

Name:

Address:

City-St-Zip:

Title: D ( ) Delete

Name: BASSETT, A J

Address: 118 MANDALAY

City-St-Zip: FORT MYERS BEACH, FL 33931

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: FRAN SANTINI

DIR

03/23/2009

Electronic Signature of Signing Officer or Director

Date