## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000105361

Entity Name: SANIBEL/CAPTIVA TRUST COMPANY

FILED Apr 17, 2008 Secretary of State

Current Principal Place of Business:			New Prin	New Principal Place of Business:		
2407 PERIWINKLE WAY, STE 7 SANIBEL ISLAND, FL 33957						
Current Mailing Address:			New Mail	New Mailing Address:		
2407 PERIWINKLE WAY, STE 7 SANIBEL ISLAND, FL 33957						
FEI Number:	65-1046994	FEI Number Applied For()	FEI Number Not App	plicable ( ) Certificate of Status Desired	d (X)	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
ROSS, JEREMY P 220 SOUTH FRANKLIN STREET TAMPA, FL 33602 US			1801 NOF	BUSH ROSS REGISTERED AGENT SERVICES, LLC 1801 NORTH HIGHLAND AVENUE TAMPA, FL 33602 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 GIORDANO, VICE-PRESIDENT				04/17/2008		
	Electron	ic Signature of Registered Agen	t	Date		
Election Can	npaign Financing	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ODEGARD, RO	AKE DRIVE #107	Title: Name: Address: City-St-Zip:	CHAI (X) Change ( ) Addition HANSER, ALBERT 1517 SAND CASTLE ROAD SANIBEL, FL 33957		
Title: Name: Address: City-St-Zip:	VARGO, MICHA	UE BEACH BLVD. #301	Title: Name: Address: City-St-Zip:	D (X) Change () Addition BROWN, STEPHEN 3819 WEST GULF DRIVE SANIBEL, FL 33957		
Title: Name: Address: City-St-Zip:	D () VARGO, MICHA 550 LIGHTHOU SANIBEL, FL 3	SE WAY	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition BURDEN, JOHN P. O. BOX 1131 SANIBEL, FL 33957		
Title: Name: Address: City-St-Zip:	D () WIGLEY, ROBE 880 SEXTANT I SANIBEL, FL 3	DRIVE, #3	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title:	D ()	Delete	Title:	( ) Change ( ) Addition		

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

SIGNATURE: DONALD A. LESCH DVC 04/17/2008

ODEGARD, ROBERT EMERITU

BONITA SPRINGS, FL 34134

1429 SANDERLING CIRCLE

25229 PELICAN CREEK CIR #203

() Delete

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

DVC

LESCH, DONALD

SANIBEL, FL 33957

() Change () Addition