## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P97000098532

Entity Name: SANIBEL LAND INVESTMENTS, INC.

**FILED** May 16, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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14835 BELLEZA LN. 303 WEST MADISON STREET US NAPLES, FL 34110

SUITE 2600

CHICAGO, IL 60606

**Current Mailing Address: New Mailing Address:** 

14835 BELLEZZA LANE NAPLES, FL 34110

FEI Number: 65-0794627 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GARLICK, THOMAS B AST, LARRY

5551 RIDGEWOOD DR STE 101 9420 BONITA BEACH ROAD, SUITE 200 NAPLES, FL 34108 BONITA SPRINGS, FL 34135

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: LARRY AST 05/16/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete Title: (X) Change ( ) Addition

RUBINTON, JON COCHLAN, STEVEN J Name: Name: 14835 BELLEZZA LANE 14835 BELLEZZA LANE Address: Address: City-St-Zip: NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34110

Title: () Delete Title: TD ( ) Change (X) Addition

BRIGGS, MALCOLM N Name: Name: 14835 BELLEZZA LANE Address: Address: NAPLES, FL 34110 City-St-Zip: City-St-Zip:

Title: Title: () Delete SD ( ) Change (X) Addition

Name: WALKER, JOHN E Name: 14835 BELLEZZA LANE Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 34110

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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.

SIGNATURE: STEVEN J. COCHLAN PD 05/16/2006