

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90567 046 ***150.00

DOCUMENT # 670845

1. Entity Name
PENINSULA DEVELOPMENT CORP.



Principal Place of Business
979 E GULF DRIVE
501
SANIBEL, FL 33957 US

Mailing Address
4004 LIZETTE LANE
GLENVIEW, IL 60025 US

20036405



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04122005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

36-3076442

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional
-Fec Required

6. Name and Address of Current Registered Agent

LANE, LYNN-MARIE
1400 COLONIAL BLVD. #14
P.O. BOX 9503
FORT MYERS, FL 33906-9503

7. Name and Address of New Registered Agent

Name George Bokios
Street Address (P.O. Box Number is Not Acceptable)
1400 Colonial Blvd # 14
City Ft Myers FL Zip Code 33906-9503

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

George Bokios

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/13/05

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE S ☐ Delete
NAME BOKIOS, EUGENIA
STREET ADDRESS 4004 LIZETTE LANE
CITY-ST-ZIP GLENVIEW, IL

TITLE T ☐ Delete
NAME BOKIOS, VICTORIA
STREET ADDRESS 4004 LIZETTE LANE
CITY-ST-ZIP GLENVIEW, IL

TITLE V ☐ Delete
NAME BOKIOS, STEVEN
STREET ADDRESS 4004 LIZETTE LN
CITY-ST-ZIP GLENVIEW, IL

TITLE P ☐ Delete
NAME BOKIOS, GEORGE
STREET ADDRESS 4004 LIZETTE LANE
CITY-ST-ZIP GLENVIEW, IL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

George Bokios

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/13/05

847-325-609