2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#765820

FILED Feb 15, 2006 Secretary of State

Entity Name: CORKSCREW WOODLANDS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 21600 CORKSCREW WOODLANDS BLVD. ESTERO, FL 33928 **Current Mailing Address: New Mailing Address:** 21600 CORKSCREW WOODLANDS BLVD. ESTERO, FL 33928 FEI Number: 59-2264345 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: SHIELDS, CHRISTOPHER J 1833 HENDRY STREET FT. MYERS, FL 33901 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete WEICK, RAYMOND Name: Name: 10701 ROSEATE SPOONBILL CIRCLE Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: Title: () Delete Title: (X) Change () Addition SMOYER, RONALD Name: SPRINGER, ROSS Name: Address: 10907 PEREGRINE FALCON CIRCLE Address: 10747 ROSEATE SPOONBILL CIRCLE City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928 Title: () Delete Title: (X) Change () Addition CAHILL, MARJORIE KLINE, CAROLYN Name: Name: 10844 BONAPARTES GULL CIRCLE 10906 PEREGRINE FALCON CIRCLE Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928 Title: () Delete Title: () Change () Addition HAMMOND, GLEN Name: Name: 10922 GROUND DOVE CIRCLE Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: Title: Title: BMD () Delete () Change () Addition MATTAX, EDSAL Name: Name: 10811 BONAPARTES GULL CIRCLE Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: Title: **BMD** () Delete Title: (X) Change () Addition KLINE, CAROLYN SLADEK, DAVE Name: Name: Address: 10844 BONAPARTES GULL CIRCLE Address: 10931 PEREGRINE FALCON CIR ESTERO, FL 33928 ESTERO, FL 33928 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: RAYMOND WEICK P 02/15/2006