

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000002060

**Entity Name:** CORKSCREW SHORES MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

4954 ROYAL GULF CIR  
FORT MYERS, FL 33966

**Current Mailing Address:**

4954 ROYAL GULF CIR  
FORT MYERS, FL 33966

**FEI Number:** 46-5124602

**Certificate of Status Desired:** No

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

CAMERATTA, NICHOLAS  
4954 ROYAL GULF CIR  
FORT MYERS, FL 33966 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name BROOKS, SCOTT  
Address 24311 WALDEN CENTER DR SUITE  
300  
City-State-Zip: BONITA SPRINGS FL 34134

Title D  
Name BLACKSMITH, RAY  
Address 4954 ROYAL GULF CIR  
City-State-Zip: FORT MYERS FL 33966

Title D  
Name CAMERATTA, NICHOLAS  
Address 4954 ROYAL GULF CIR  
City-State-Zip: FORT MYERS FL 33966

*I hereby 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 all other like empowered.*

**SIGNATURE:** NICHOLAS CAMERATTA

D

04/22/2015

Electronic Signature of Signing Officer/Director Detail

Date