#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48209

**Entity Name: CORKSCREW ISLAND MISSIONS INCORPORATED** 

FILED Feb 02, 2016 Secretary of State CC7680001685

## **Current Principal Place of Business:**

22022 IMMOKALEE RD NAPLES. FL 34120

### **Current Mailing Address:**

22022 IMMOKALEE RD NAPLES. FL 34120

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

KLINE, ROBERT LEE REV 22022 IMMOKALEE RD NAPLES, FL 34120 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 P Title S

NameKLINE, ROBERT REVNameSUMMERALLS, CURTISAddress22022 IMMOKALEE RDAddress4821 42ND STREET NECity-State-Zip:NAPLES FL 34120City-State-Zip:NAPLES FL 34120

Title TR Title VP

Name MORRIS, SHAWN Name DUNLAP, GILBERT

Address 3255 48TH AVE NE Address LILAC LN

City-State-Zip: NAPLES FL 34120 City-State-Zip: NAPLES FL 34120

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: REV. BOBBY KLINE

**PRES** 

02/02/2016