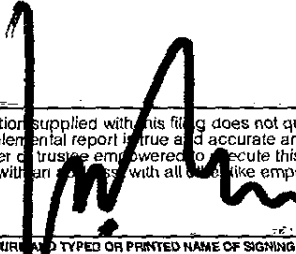


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # K59131 1. Entity Name LA PENINSULA DEVELOPMENT OF SOUTHWEST FLORIDA, INC.			
Principal Place of Business 224 STILLWATER CT 224 STILLWATER COURT MARCO ISLAND, FL 33937 US		Mailing Address 224 STILLWATER CT MARCO ISLAND, FL 33937 US	
DO NOT WRITE IN THIS SPACE			
		04022005 No Chg-P CR2E034 (10/03)	
		4. FEI Number 59-2926519	Applied For Not Applicable
		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent RETHATI, GEORGE O. 224 STILLWATER COURT SUITE 1-B0 MARCO ISLAND, FL 33937		DO NOT WRITE IN THIS SPACE	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE _____			
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 NAME STREET ADDRESS CITY-ST-ZIP	D RETHATI, GEORGE O. 224 STILLWATER MARCO ISLAND, FL		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
DO NOT WRITE IN THIS SPACE			
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 duties like empowered.			
SIGNATURE:  <i>Geo. Rethati</i> 04/22/05 239 642 6469 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			