2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009743

131 NEW LEGACY DR.

SEFFNER, FL

Address:

City-St-Zip:

FILED Apr 16, 2007 Secretary of State

Entity Na	me: COOKS	SON HILLS TOY RUN, II	NC.		
Current P	rincipal Plac	ce of Business:	New Principal F	New Principal Place of Business:	
2201 TANO BRANDON	GLEWOOD \ N, FL	VAY			
Current M	lailing Addr	ess:	New Mailing Ad	New Mailing Address:	
PO BOX 1 SEFFNER	13 , FL 335830	113			
FEI Number	: 32-0131486	FEI Number Applied F	or () FEI Number Not Applicable	() Certificate of Status Desired ()	
Name and	l Address of	Current Registered A	gent: Name and Addı	ess of New Registered Agent:	
4100 W. K SUITE 210 TAMPA, F The above	L US		t for the purpose of changing its reg	istered office or registered agent, or both,	
SIGNATUI					
	Electro	onic Signature of Regist	ered Agent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BROWN, SHA	EWOOD WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BROWN, WII	EWOOD WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D SHARP, ROB	() Delete FRT V	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: SHARON R BROWN D 04/16/2007