

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35814

**FILED**  
**Apr 08, 2004**  
**Secretary of State****Entity Name:** CORKSCREW REGIONAL ECOSYSTEM WATERSHED LAND AND WATER TRUST, INCORPORATED**Current Principal Place of Business:**23998 CORKSCREW RD  
ESTERO, FL 33928 US**New Principal Place of Business:****Current Mailing Address:**23998 CORKSCREW RD  
ESTERO, FL 33928 US**New Mailing Address:****FEI Number:** 65-0246331**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**HAMMOND, WILLIAM  
5456 PAKER DRIVE  
FT. MYERS, FL 33919 US**Name and Address of New Registered Agent:**

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:**

Title: CTR ( ) Delete  
Name: DALTRY, WAYNE  
Address: 1995 LONGFELLOW DRIVE  
City-St-Zip: FORT MYERS, FL 33903

Title: VCT ( ) Delete  
Name: GRAHAM, DAVID  
Address: 3461 BONITA BAY BLVD.  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: S ( ) Delete  
Name: CARLSON, ED  
Address: 375 SANCTUARY RD.  
City-St-Zip: NAPLES, FL 34120

Title: T ( ) Delete  
Name: JUDAH, RAY  
Address: 13390 CORAL DRIVE  
City-St-Zip: FORT MYERS, FL 33908

Title: D ( ) Delete  
Name: LINDBLAD, ELLEN  
Address: 23998 CORKSCREW RD  
City-St-Zip: ESTERO, FL 33928

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CTR (X) Change ( ) Addition  
Name: CARLSON, ED  
Address: 375 SANCTUARY ROAD  
City-St-Zip: NAPLES, FL 34120

Title: VCT (X) Change ( ) Addition  
Name: JUDAH, RAY  
Address: P.O. BOX 398  
City-St-Zip: FORT MYERS, FL 33902

Title: S (X) Change ( ) Addition  
Name: LURVEY, NEENA  
Address: 13221 BRIDGEFORD AVE.  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: T (X) Change ( ) Addition  
Name: HAWKINS, MARY ELLEN  
Address: 739 FIFTH AVE, NORTH  
City-St-Zip: NAPLES, FL 34102

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ELLEN LINDBLAD

D

04/08/2004

Electronic Signature of Signing Officer or Director

Date