

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35814

FILED
Apr 21, 2005
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: CARLSON, ED
Address: 375 SANCTUARY ROAD
City-St-Zip: NAPLES, FL 34120

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

04/21/2005

Electronic Signature of Signing Officer or Director

Date