## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P02000107811**

1. Entity Name

CORKSCREW PLANTATION II, INC.



Principal Place of Business

26811 SOUTH BAY DRIVE

SUITE #350 BONITA SPRINGS, FL 34134 Mailing Address

26811 SOUTH BAY DRIVE SUITE #350 BONITA SPRINGS, FL 34134 FILED Apr 02, 2007 08:00 AM Secretary of State



## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

 
 03282007
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number 30-0118425
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

LOTTES, KEVIN R 5801 PELICAN BAY BLVD. SUITE 300 NAPLES, FL 34108-2709

SIGNATURE:

## 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	fanatoenia (NOTE: Reco	eterned Appent organisms	required when reinstating)	DATE
	Signature, typed or printed havie or registered agent and the	ii applicable. (NOTE: nego	stered Agent signature	required when remistating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-S1-ZIP	PD ROSINUS, FRANZ 26811 SOUTH BAY DR. #350 BONITA SPRINGS, FL 34134				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000685554 04/09/07-80010-012 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		_		IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 other like empowered.					