2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000171950

Entity Name: CORKSCREW DEVELOPMENT, INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:

New Principal Place of Business:

4551 GULF SHORE BLVD N #1801 NAPLES, FL 34103

Current Mailing Address:

New Mailing Address:

WICKER, JOHN M

C/O ROBERT D ROYSTON JR ESQ COSTELLO & ROYSTON P.O. DRAWER 60205 FT. MYERS, FL 33906

C/O JOHN M. WICKER, P.A. P.O. DRAWER 60205 FORT MYERS, FL 33906

FEI Number: 22-3905475

FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ROYSTON, ROBERT D JR.

12670 NEW BRITTANY BLVD., STE. 101 FT. MYERS, FL 33907

12670 NEW BRITTANY BLVD., STE. 101

FORT MYERS, FL 33907

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: JOHN M. WICKER

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete BROOKING, JOHN Name:

4551 GULF SHORE BLVD., NORTH #1801 Address:

City-St-Zip: NAPLES, FL 34013 Title: (X) Change () Addition RODRIGUEZ LASTRE, GILDA Name: 4551 GULF SHORE BLVD. N., #1801 Address:

City-St-Zip: NAPLES, FL 34103

Title: () Delete Name: BACK, DENNIS R

3716 RIVERVAIL DR. Address: COLUMBUS, OH 43221 City-St-Zip:

Title: DST (X) Change () Addition

Name: BACK, DENNIS R

14571 BELLINO TERRACE #101 Address: BONITA SPRINGS, FL 34135 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GILDA RODRIGUEZ LASTRE DP

04/27/2009