2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000123431

1. Entity Name
COOKE LAND DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
41660 LITTLE FARM ROAD	P.O. BOX 4399
PUNTA GORDA, FL 33982	N. FORT MYERS, FL 33918

DO NOT WRITE IN THIS SPACE

02102007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
41-2184961	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

COOKE, TERRY J
41660 LITTLE FARM ROAD
PUNTA GORDA, FL 33982

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 _____   DATE
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	COOKE, TERRY J
STREET ADDRESS	41660 LITTLE FARM ROAD
CITY-ST-ZIP	PUNTA GORDA, FL 33982
TITLE	V
NAME	COOKE, NAIDA H
STREET ADDRESS	41660 LITTLE FARM ROAD
CITY-ST-ZIP	PUNTA GORDA, FL 33982
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000671404
03/28/07-80028-002 150.00

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE: _____   3/15/07   239-567-1089
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #