FILE NOW: FILING FEE IS $61.25

FILED
Apr 03 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N26361** **(8)**

1. Corporation Name

THE VILLAGE AT WILDCAT RUN CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
20101 WILDCAT RUN DRIVE P.O. BOX 366 ESTERO FL 33928	20101 WILDCAT RUN DRIVE P.O. BOX 366 ESTERO FL 33928-0366

3. Date Incorporated or Qualified: **05/09/1988**
3a. Date of Last Report: **04/24/1996**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: **65-0079441** ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

VERNA RAE CAUDLE
20101 WILDCAR RUN DR.
ESTERO FL 33928

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BELTER, JOHN F.		1.2 NAME	
STREET ADDRESS	20130-4 GOLDEN PATHER DR		1.3 STREET ADDRESS	
CITY-ST-ZIP	ESTERO FL		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	NOEL, JOYCE A.		2.2 NAME	
STREET ADDRESS	20170-4 GOLDEN PATHER DR		2.3 STREET ADDRESS	
CITY-ST-ZIP	ESTERO FL		2.4 CITY-ST-ZIP	
TITLE	VP	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	TRITTIPO, JACK		3.2 NAME	
STREET ADDRESS	20150-1 GOLDEN PANTHER DR.		3.3 STREET ADDRESS	
CITY-ST-ZIP	ESTERO FL		3.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	MASTRIPOLITO, ROBERT		4.2 NAME	
STREET ADDRESS	20230-2 GOLDEN PANTHER DR.		4.3 STREET ADDRESS	
CITY-ST-ZIP	ESTERO FL		4.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	CAUDLE, VERNA		5.2 NAME	
STREET ADDRESS	20101 WILDCAT RUN DR.		5.3 STREET ADDRESS	
CITY-ST-ZIP	ESTERO FL		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ John F. Belter 3-21-97 941-947-4911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR President Date Daytime Phone # 0067097