## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

1006

DIVISION OF CORPORATIONS

1990	W. V.	
DOCUMENT #	N95000004	574 (8)
THE PINES AT WILDO INC.	CAT RUN HOMEOWNE	RS ASSOCIATION,
Principal Place of Business	Mailing	Address
20101 WILDCAT RUN DRIVE		WILDCAT RUN DRIVE



20101 WILDCAT RUN DRIVE ESTERO FL 33928			20101 WILDCAT RUN DRIVE ESTERO FL 33928					
					3. Data Incorporated or Qualified 09/15/1995	3a. Date of Last	Report	
2. Principal Pla	ace of Business	2a. Mailing Addres	s		4. FEI Number		Applied For	
21		26			APPLIED FOR		Not Applicable	
Suite, Apt #	¥, etc.	Suite, Apt. #, 6	etc.		5. Certificate of Status Desired		Additional Required	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
Zip	Country	Zip	h	intry	8. This corporation has liability for in		. 199.032,	
24	25	29	30	1	Florida Statutes L  10. Name and Address of New Re	Yes No		
	9. Name and Address of Curi	rent Registered Agent		81 Nanie	10. Native and Address of New Year	Gisteled Agent		
014500	OUDIOTODIJED I ECO			l Ivallie				
SHIEUS,	CHRISTOPHER J ESQ.			82 Street Ad	dress (P.O. Box Number is Not Acceptable	<del>3</del> )		
	NDRY STREET YERS FL 33902-1507			83				
FUKI MI	TERS FL 33902-1507			63				
	•			64 City		FL 85 Z	ip Code	
	¥	0.0 1017 1500 51- 1-	Deat deat the abo	1 1	oration submits this statement for the purp		registered office	
or registere	to the provisions of sections 617.05 ed agent, or both, in the State of FI th, and accept the obligations of, Si	lorida. Such change was a	uthorized by the	corporation's bo	pard of directors. Thereby accept the appoint	intment as registered	d agent Ta⁄ni	
SIGNATURE _						DATE		
	Signature, typed or ported natue of registered to	gest and title if applicable  AND DIRECTORS	(NOT): Hayistere	! Agent signatura resp.	area when reinstating. - A() हम कि कि कि किस्ती है जो कि कि स्मिन्ति		ala 7, 7,	
12.	OFFICERS	AND DIRECTORS		ILE .		Change	Add:tiun	
TIFLE	LANDEY, LUVERNE O			IAME				
NAMÉ	% 20101 WILDCAT RUN DI	RIVE SE		TREET ADDRESS				
STREET ADDRESS	ESTERO FL 33928	11176, 02		i				
CITY-ST-ZIP	D	DELE		CITY-ST-ZIP		Change	Addition	
TIFLE	LANDEY, BETTY			IAME				
NAME	% 20101 WILDCAT RUN D	RIVE SE						
STREET ADDRESS	ESTERO FL 33928	ruve, or		THEET ADDRESS				
CITY - ST - ZIP	D ESTENO PL 33820	□ D£LE		CITY-ST-ZIP		Change	Addition	
THILE	CAUDLE, VERNA	Lingue		· ·				
NAME	% 20101 WILDCAT RUN D	RIVE SE		LAME				
STREET ADDRESS	ESTERO FL 33928	11114, 04		STREET ADORESS				
CITY - ST - ZIP	EGITIO I E OOGEO	[ ] DELE		CITY - ST - ZIP		Change	Addition	
TITLE				NAME			<del></del>	
NAME				NAME STREET ADDRESS				
STREET ADDRESS				l				
CITY - ST - ZIP		<b>□</b> DELE		CITY-ST-ZIP FITLE		Change	Addition	
TITLE				NAME	20000190			
NAME				STREET ADDRESS	<b>2000018</b> 3 -05/21/96011	45n22		
STREET ADDRESS					***61,25	t fair - Pailtenten		
CHY-ST-ZIP		DELI		CITY - ST - ZIP TITLE	reserved 1 s tage	Change	Addition	
TITLE				NAME		,-	Ĭ	
NAME			62	NAME			• /	
	i e		B	PARCEL INCOMES				
STREET ADDRESS				STREET ADDRESS CITY - ST - ZIP			1.56	

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 attact yield with an address.

SIGNATURE:

BIGNATURE AND TYPED SEASONED NAME OF BIGNING OFFICER OR DIRECTOR