2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 8:00 am
Secretary of State
04-04-2005 90055 031 ****61.25

DOCUMENT # 730097

1. Entity Name
WILDERNESS COUNTRY CLUB, INC.

Principal Place of Business	Mailing Address
101 CLUBHOUSE DR. NAPLES, FL 33942	101 CLUBHOUSE DR. NAPLES, FL 33942

03292005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1623165 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BECKER, POLIAKOFF & STREITFELD, P.A. BANK OF AMERICA CENTER 4501 TAMIAMI TRAIL N., SUITE 214 NAPLES, FL 34103-0000	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 if applicable (NOTE: Registered Agent Signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DIENST, HENRY 103 CLUBHOUSE LN., APT.#384 NAPLES, FL 34105	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Dienst, Henry 103 Clubhouse Ln., Apt. 384 Naples, FL 34105	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BAILEY, ANDREW 102 WILDERNESS DR., APT 1115 NAPLES, FL 34105	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T THATCHER, ROBERT 107 WILDERNESS DR., APT# 109 NAPLES, FL 34105	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Thatcher, Robert 107 Wilderness Dr., Apt. 109 Naples, FL 34105	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ROE, BARBARA 112 WILDERNES DR APT., 123 NAPLES, FL 34105	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Tell, Charlie 103 Clubhouse Dr., Apt. 353 Naples, FL 34105	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP LIBER, JACK 107 WILDERNESS DR APT 112 NAPLES, FL 34105	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Liber, Jack 107 Wilderness Dr., Apt. 112 Naples, FL 34105	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BROOKES, CHARLES 108 WILDERNESS DR.APT. 230 NAPLES, FL 34105	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I 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 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 617, 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: R Thatcher Secr. 3/30/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #