

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 07, 2002 8:00 am**  
**Secretary of State**

05-07-2002 90265 013 \*\*\*\*61.25

**DOCUMENT # 765313**

1. Entity Name  
**"DING" DARLING WILDLIFE SOCIETY, INC.**

Principal Place of Business C/O LAURA M HESSE WILDLIFE DR. SANIBEL FL 33957	Mailing Address C/O LAURA M HESSE 1 WILDLIFE DR. SANIBEL FL 33957
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DO NOT WRITE IN THIS SPACE

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

4. FEI Number <b>59-2240895</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**HESSE, LAURA M**  
**3357-1 YUKON CIRCLE**  
**FORT MYERS FL 33907**

7. Name and Address of New Registered Agent  
 Name  
**Sharron K. Lightner**  
 Street Address (P.O. Box Number is Not Acceptable)  
**19398 Orchidtree Court**  
 City  
**Lehigh Acres FL 33936**

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.

SIGNATURE *Sharron K Lightner* **Sharron K. Lightner** **4/22/02**  
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW: FEE IS \$61.25**      9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees      **Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ATD</b> <b>KLOOSTERMAN, MARILYN</b> <b>1856 ARDSLEY WAY</b> <b>SANIBEL FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>KRIVAL, ART</b> <b>736 DURION COURT</b> <b>SANIBEL FL 33957</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>RANKIN, JEANNE</b> <b>1986 WILD LIME DRIVE</b> <b>SANIBEL FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <b>HOOPER, MARILYN</b> <b>5280 LADYFINGER LAKE ROAD</b> <b>SANIBEL FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD</b> <b>HEIDORN, DONALD</b> <b>5514 SW 11 AVE</b> <b>CAPE CORAL FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HULIT, DICK</b> <b>3429 WEST GULF DRIVE</b> <b>SANIBEL FL</b>	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ASD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Marilyn L. Hooper* **Marilyn L. Hooper, Treasurer** **4/22/02** 941-472-1100  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)

Attachment  
Document #

765313  
785988

10. Officers and Directors (continued)

Title D  
Name John Carney  
Street Address 1767 Serenity Lane  
City-St-Zip Sanibel, FL 33957

Title D  
Name William Currise  
Street Address 11801 Oakmont Court  
City-St-Zip Ft. Myers, FL 33908

Title VP, D  
Name Michael Cuscaden  
Street Address 923 Peppertree Place  
City-St-Zip Sanibel, FL 33957

Title D  
Name Frank Fallert  
Street Address 1438 Sandpiper Circle  
City-St-Zip Sanibel, FL 33957

Title S, D  
Name Joseph Fisher  
Street Address 1249 Seagrape Lane  
City-St-Zip Sanibel, FL 33957

Title D  
Name Marc Giattini  
Street Address 5270 Indian Court  
City-St-Zip Sanibel, FL 33957

Title P, D  
Name James Sprankle  
Street Address 1147 Golden Olive Court  
City-St-Zip Sanibel, FL 33957

Title D  
Name Eugene Steele  
Street Address 949 Kings Crown Drive  
City-St-Zip Sanibel, FL 33957

Title D  
Name Jane Werner  
Street Address 651 East Gulf Drive  
City-St-Zip Sanibel, FL 33957