

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006147

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** WILDCAT BOOSTER CLUB OF ESTERO, INC.

**Current Principal Place of Business:**

21900 RIVER RANCH RD  
ESTERO, FL 33928

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1116  
ESTERO, FL 33929

**New Mailing Address:**

**FEI Number:** 65-1030689

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROHRMAN, THERESA  
17644 TAYLOR DRIVE  
FORT MYERS, FL 33908 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ROHRMAN, THERESA  
**Address:** 17644 TAYLOR DRIVE  
**City-St-Zip:** FORT MYERS, FL 33908

**Title:** S  
**Name:** OPALENSKY, VERONICA  
**Address:** 17773 OAKMONT RIDGE CIRCLE  
**City-St-Zip:** FORT MYERS, FL 33967

**Title:** S  
**Name:** LARKIN, MARY  
**Address:** 9791 COUNTRY OAKS DR  
**City-St-Zip:** FORT MYERS, FL 33967

**Title:** VP  
**Name:** PEPPARD, MEGAN  
**Address:** 7114 BABCOCK ROAD  
**City-St-Zip:** FORT MYERS, FL 33967

**Title:** T  
**Name:** PIETRZYK, STEVE  
**Address:** 20421 TALON TRACE  
**City-St-Zip:** ESTERO, FL 33928

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** THERESA ROHRMAN

P

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date