

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39315

FILED
Jan 27, 2004
Secretary of State

Entity Name: WILDCAT FARMS WATER MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

22500 STATE RD 82
FT. MYERS, FL 33913 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 3147
IMMOKALEE, FL 34143 US

New Mailing Address:

FEI Number: 59-3110059 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DUNN, MARK D
24 HIGHLAND AVE SE
LEHIGH ACRES, FL 33936 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: D () Delete
Name: INGRAM, BRUCE B., JR.,
Address: 7400 STATE RD 544
City-St-Zip: WINTER HAVEN, FL

Title: PD () Delete
Name: LLOYD, CALVIN P III
Address: 8550 STATE RD., 82
City-St-Zip: FELDA, FL 33853

Title: ST () Delete
Name: DUNN, MARK D
Address: 24 HIGHLAND AVE, S.E.
City-St-Zip: LEHIGH, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CRUMBLY, DAVID
Address: 20205 US HIGHWAY 27
City-St-Zip: LAKE WALES, FL 33859

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MARK D. DUNN

_____ Electronic Signature of Signing Officer or Director

ST

01/27/2004

_____ Date