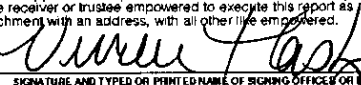


**FILED**  
**Mar 31, 2003 8:00 am**  
**Secretary of State**

03-31-2003 90219 030 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                           |                                            |                                                                                                                                                       |                                                                                   |         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|---------|
| <b>DOCUMENT # P97000081277</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                           |                                            |                                                                                                                                                       |  |         |
| 1. Entity Name<br><b>WILDCAT RUN OF LEE COUNTY, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                           |                                            |                                                                                                                                                       |                                                                                   |         |
| Principal Place of Business<br>24301 WALDEN CENTER DRIVE<br>BONITA SPRINGS, FL 34134                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                           |                                            | Mailing Address<br>24301 WALDEN CENTER DRIVE<br>BONITA SPRINGS, FL 34134                                                                              |                                                                                   |         |
| 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 <b>59-3467946</b> Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                           |                                            |                                                                                                                                                       |                                                                                   |         |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                           |                                            |                                                                                                                                                       |                                                                                   |         |
| 6. Name and Address of Current Registered Agent<br><b>HASTINGS, VIVIEN N<br/>2401 WALDEN CENTER DRIVE<br/>SUITE 300<br/>BONITA SPRINGS, FL 34134</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                           |                                            | 7. Name and Address of New Registered Agent<br>Name _____<br>Street Address (P.O. Box Number is Not Acceptable) _____<br>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 _____ (NOTE: Registered Agent's signature required when resigning) DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                           |                                            |                                                                                                                                                       |                                                                                   |         |
| 9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |                                            |                                                                                                                                                       |                                                                                   |         |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                           |                                            |                                                                                                                                                       |                                                                                   |         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DP                        | <input type="checkbox"/> Delete            |                                                                                                                                                       |                                                                                   |         |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | KERPER, DIANE             |                                            |                                                                                                                                                       |                                                                                   |         |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 24301 WALDEN CENTER DRIVE |                                            |                                                                                                                                                       |                                                                                   |         |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | BONITA SPRINGS, FL 34134  |                                            |                                                                                                                                                       |                                                                                   |         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DV                        | <input checked="" type="checkbox"/> Delete |                                                                                                                                                       |                                                                                   |         |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | FLINN, MILTON G           |                                            |                                                                                                                                                       |                                                                                   |         |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 24301 WALDEN CENTER DRIVE |                                            |                                                                                                                                                       |                                                                                   |         |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | BONITA SPRINGS, FL 34134  |                                            |                                                                                                                                                       |                                                                                   |         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DT                        | <input type="checkbox"/> Delete            |                                                                                                                                                       |                                                                                   |         |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | MCCHESNEY, VALERIE        |                                            |                                                                                                                                                       |                                                                                   |         |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 24301 WALDEN CENTER DRIVE |                                            |                                                                                                                                                       |                                                                                   |         |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | BONITA SPRINGS, FL 34134  |                                            |                                                                                                                                                       |                                                                                   |         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | AS                        | <input type="checkbox"/> Delete            |                                                                                                                                                       |                                                                                   |         |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | PIERCE, STEPHEN C         |                                            |                                                                                                                                                       |                                                                                   |         |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 24301 WALDEN CENTER DRIVE |                                            |                                                                                                                                                       |                                                                                   |         |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | BONITA SPRINGS, FL 34134  |                                            |                                                                                                                                                       |                                                                                   |         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | V                         | <input type="checkbox"/> Delete            |                                                                                                                                                       |                                                                                   |         |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | FRY, DAVID L              |                                            |                                                                                                                                                       |                                                                                   |         |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 24301 WALDEN CENTER DRIVE |                                            |                                                                                                                                                       |                                                                                   |         |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | BONITA SPRINGS, FL 34134  |                                            |                                                                                                                                                       |                                                                                   |         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | VS                        | <input type="checkbox"/> Delete            |                                                                                                                                                       |                                                                                   |         |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | HASTINGS, VIVIEN N        |                                            |                                                                                                                                                       |                                                                                   |         |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 24301 WALDEN CENTER DRIVE |                                            |                                                                                                                                                       |                                                                                   |         |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | BONITA SPRINGS, FL 34134  |                                            |                                                                                                                                                       |                                                                                   |         |
| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11<br><input type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>SEE ATTACHED FOR ADDITIONAL DIRECTORS AND OFFICERS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                           |                                            |                                                                                                                                                       |                                                                                   |         |
| 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 607, 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 life empowered. |                           |                                            |                                                                                                                                                       |                                                                                   |         |
| SIGNATURE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                           |                                            | 03/25/03 (239) 498-8605                                                                                                                               |                                                                                   |         |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR<br><b>Vivien N. Hastings, Secretary</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                           |                                            |                                                                                                                                                       |                                                                                   |         |

CR2E034 (10/02)

Attachment # 80066671

ATTACHMENT TO 2003 UNIFORM BUSINESS REPORT  
FOR  
WILDCAT RUN OF LEE COUNTY, INC.  
DOCUMENT #P97000081277

11. Additions and Changes

Title: V ☐ Change ☒ Addition

Name: James P. Dietz

Street Address: 24301 Walden Center Drive

City-State-Zip: Bonita Springs, FL 34134

Title: V ☐ Change ☒ Addition

Name: James D. Cullen

Street Address: 24301 Walden Center Drive

City-State-Zip: Bonita Springs, FL 34134

Title: V ☐ Change ☒ Addition

Name: Steven C. Adelman

Street Address: 24301 Walden Center Drive

City-State-Zip: Bonita Springs, FL 34134

Title: VD ☐ Change ☒ Addition

Name: Edward D'Alessandro

Street Address: 24301 Walden Center Drive

City-State-Zip: Bonita Springs, FL 34134