## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000104153

City-St-Zip:

FENTON, MI 48430

FILED Jan 08, 2009 Secretary of State

Entity Name: WILDCAT INVESTORS OF NAPLES, INC.					
Current Principal Place of Business:				New Principal Place of Business:	
9696 BONITA BEACH ROAD SUITE 203 BONITA SPRINGS, FL 34135				9010 STRADA STELL CT SUITE 201 NAPLES, FL 34109	
Current Mailing Address:				New Mailing Address:	
9696 BONITA BEACH ROAD SUITE 203 BONITA SPRINGS, FL 34135				9010 STRADA STELL CT SUITE 201 NAPLES, FL 34109	
FEI Number:	59-3488580	FEI Number Applied For ( )	FEI Num	ber Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:	
MALTESE, BEN J 9696 BONITA BEACH ROAD SUITE 203 BONITA SPRINGS, FL 34135 US The above named entity submits this statement for the purpose of				MALTESE, BEN J 9010 STRADA STELL CT SUITE 201 NAPLES, FL 34109 US	
in the State		y submits this statement for the p	urpose or	changing its registered	office of registered agent, or both,
SIGNATURE: BEN J MALTESE				01/08/2009	
Electronic Signature of Registered Agent				Date	
Election Cam	npaign Financ	ing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD MALTESE, E 1754 PERSI NAPLES, FL	MMON COURT		Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	VD MANSOUR, 4 BARRINGT FENTON, MI	ON HILLS		Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address:	MANSOUR,	( ) Delete GERALD J JX DU LAC DR		Title: Name: Address:	( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: BEN J MALTESE PD 01/08/2009