2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 02, 2007 08:00 A Secretary of State

DOCUMENT # P99000094022 1. Entity Name WILDCAM REALTY, INC.			Secretary of S			
*	ce of Business	Mailing Address	·			
42 GOLF CO Naples, FL	TTAGE DRIVE 34105	42 GOLF COTTAGE DRIVE Naples, FL 34105				
4. 10.4	4	C. P. S. Company (1988), specifical control of	ere be even			
					6 6 6 0 60 00 05 05 6	U(210 E8 U 4 11 1 1 1 1 1 1 1 1 1 1 1
	O NOT WRITE	IN THIS SDA	CE	02212007		2E034 (11/05)
	O NOT WRITE	III BEILOSOFA	CL .	4. FEI Number 59-3607		Applied For Not Applicable
				5. Certificate of	of Status Desired	\$8,75 Additional Fee Required
	6. Name and Address of Current Ro	egistered Agent		37.		39
WILDER, F. DANIEL 42 GOLF COTTAGE DRIVE				D O	NOT WRI	TE 🐎
NAPLES, FL 34105				in T	HIS SPAC	E
	e named entity submits this statement for t tions of registered agent.	he purpose of changing its register	ed office or register	ed agent, or both	n, in the State of Florida.	am familiar with, and accept
SIGNATURE.						
	Signature, typed or printed name of registered agent and	NOTE: Registers	d Agent signature required	when reinstating)		ATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				.00 May Be ed to Fees	000000065 03/13/07-80	4044 045-025 150.00
10.	OFFICERS AND D	RECTORS	19 3 3 4 4 5	96 200		
TITLE NAME	PD WILDER, F. DANIEL					
STREET ADDRESS CITY-ST-ZIP	42 GOLF COTTAGE DRIVE NAPLES, FL 34105		in the second second			A CONTRACTOR OF THE CONTRACTOR
TITLE						
STREET ADDRESS						
TITLE						The second of the second
NAME STREET ADDRESS	and the same of th					
CITY-ST-ZIP					NOT WRI	
TIFLE NAME				IN 7	THIS SPAC	SE ·
STREET ADDRESS					Age Village	
TITLE						
NAME STREET ADDRESS			· · · · · · · · · · · · · · · · · · ·			en e
CITY-SI-ZIP		· · · · · · · · · · · · · · · · · · ·				
NAME						The state of the s
STREET ADDRESS CITY+ST-ZIP			校 是	1 46 m		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.

SIGNATURE: Jonature and typed or printed hame of signing officer or director Only Only Organic Phone 4