

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 729425

(9)

1. Corporation Name

WHISPERING PINES CLUB, INC.



Principal Place of Business

Mailing Address

HC 1 BOX 676
GEORGETOWN FL 32139-9512
US

HC 1 BOX 676
GEORGETOWN FL 32139-9512
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9 Name and Address of Current Registered Agent

COOROS, GEORGE
HC 1 BOX 650-D
GEORGETOWN FL 32139

3. Date Incorporated or Qualified
04/15/1974

3a. Date of Last Report
05/01/1995

4. FEI Number
59-1886612

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and I accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

Joan M. Gorski

Joan M. Gorski, Treasurer

1/22/96

12. OFFICERS AND DIRECTORS

1101 NAME
1102 STREET ADDRESS
1103 CITY, STATE, ZIP
1104 TITLE
1105 NAME
1106 STREET ADDRESS
1107 CITY, STATE, ZIP
1108 TITLE
1109 NAME
1110 STREET ADDRESS
1111 CITY, STATE, ZIP
1112 TITLE
1113 NAME
1114 STREET ADDRESS
1115 CITY, STATE, ZIP
1116 TITLE
1117 NAME
1118 STREET ADDRESS
1119 CITY, STATE, ZIP
1120 TITLE

VP
PIERSON, DANIEL K
HC 1 BOX 648 S
GEORGETOWN FL
D
LASH, RAY
PONDEROSA & PLANTATION PINES DRIVE
GEORGETOWN FL
D
UNDERWOOD, FRED
HC 1 BOX 850
GEORGETOWN FL
PD
COOROS, GEORGE
HC 1 BOX 650-D
GEORGETOWN FL
D
SEVERSON MYRON
PONDEROSA & PLANTATION PINES DRIVE
GEORGETOWN FL
TD
GORSKI, JOAN
PONDEROSA & PLANTATION PINES DRIVE
GEORGETOWN, FL 00000

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (1)

1201 NAME
1202 STREET ADDRESS
1203 CITY, STATE, ZIP
1204 TITLE
1205 NAME
1206 STREET ADDRESS
1207 CITY, STATE, ZIP
1208 TITLE
1209 NAME
1210 STREET ADDRESS
1211 CITY, STATE, ZIP
1212 TITLE
1213 NAME
1214 STREET ADDRESS
1215 CITY, STATE, ZIP
1216 TITLE
1217 NAME
1218 STREET ADDRESS
1219 CITY, STATE, ZIP
1220 TITLE

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 or empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 as changed, or on an attachment with an address.

SIGNATURE:

Joan M. Gorski
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Joan M. Gorski, Treasurer

1/22/96

(904) 698-1325

CR2E037 (12/95)