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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1996

SIGNATURE:

DIVISION OF CORPORATIONS

DOCUMENT # 761815 (0) WHISKEY CREEK VILLAGE GREEN CONDOMINIUM, SECTION TWELVE, ASSOCIATION, INC.					
Principal Place of	of Business	Mailing Address			E BOIL GIBJE BIBIL BIBEY BIBIJ BIBEL BIBIL INDE
12734 KENWO SUITE 32 FT. MYERS FL	OD LANE	12734 KENWOOD LANE SUITE 32 FT. MYERS FL 33907		Date Incorporated or Qualified	3a. Date of Last Report
US		US		02/09/1982	05/01/1995
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number 59-2208194	Applied For Not Applicable
1		Suite, Apt. #, etc.			\$8.75 Additional
Suite, Apt. #	, etc.	27		Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
3		28	Country	Trust Fund Contribution 8. This corporation has liability for	Added to rees
Zip 4	Country 25	Zip 29	30	Florida Statutes	☐ Yes ☐ No
4	9. Name and Address of Current			10. Name and Address of New F	legistered Agent
			81 Name	HAEL FLEMING	•
MICHAEL	. FLEMING & ASSOCIATES				
	ENWOOD LANE		90 MIC	HALL PLEMING +	113300 100
SUITE 32			193	34-37 KENMODD	
ft. Myei	R\$ FL 33907		84 City	RT MYERS	FL 85 Zip Code
44 0	o the provisions of Sections 617.0502	C17 JEON Florida Statutan		time and mita this atatamont for the nu	rpose of changing its registered offic
			- the above-barried corb		
or ropictor	ad acent or both in the State of Floric	da. Soco change was aumonzed	, the above-named corpo i by the corporation's bo	ard of directors. I hereby accept the app	pointment as registered agent. I am
or ropictor	of the provisions of Sections 17.50 and agent, or both, in the State of Floric h, and accept the obligations of, Sections.	da. Soco change was aumonzed	, the above-named corpo i by the corporation's bo	oration submits this statement for the po- lard of directors. I hereby accept the app	oointment as registered agent. I am
or register familiar wit	ed agent, or both, in the State of Floric h, and accept the obligations of, Secti	oa. Such Criange was authorized ion 617.0503, Florida Statutes.	, the above-named corporation's bo	ired when reinstalling!	DATE
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR