2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #761815

WHISKEY CREEK VILLAGE GREEN CONDOMINIUM,



FILED

May 05, 2006 8:00 am Secretary of State

05-05-2006 90172 012 ****61.25

SECTION TWELVE, ASSOCIATION, INC. 40000000 Principal Place of Business Mailing Address 8270 COLLEGE PARKWAY #103 8270 COLLEGE PARKWAY #103 FORT MYERS, FL 33919 US FORT MYERS, FL 33919 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01192006 Chg-NP CR2E037 (11/05) 4. FEI Number 59-2208194 Applied For City & State City & State Not Applicable Zìo Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TEAGUE, GEORGE 8270 COLLEGE PARKWAY #103 Street Address (P.O. Box Number is Not Acceptable) FORT MYERS, FL 33919 Zip Code FL 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 Signature, typed or printeg (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Due by May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Delete TITLE TITLE ☐ Change ★ Addition GAMACHE, DON NAME NAME DON FOSSELMAN 5653 BADENCT STREET ADDRESS 5679 BADEN CT SW STREET ADDRESS CITY-ST-ZIP FT MYERS, FL CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HAVILL, REGINALD NAME 5676 BADEN CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT MYERS, FL 33919 CITY-ST-ZIP P DV Change TITLE ☐ Delete TITI F ☐ Addition MILOS, MILE MIKE MILOS NAME NAME 5670 BALKAN CT STREET ADDRESS 5670 BALKAN COURT STREET ADDRESS FT MYERS, FL 33919 CITY-ST-ZIP CITY-ST-7IP FTM FL 33919 TITI F Delete Delete TITLE ☐ Change Addition ZUSPANN, JOHN NAME NAME FRED ROWE 5660 BALKAN CT 5664 BALKAN CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33908 CITY-ST-ZIP FL 33919 Detete TITLE TITI F ☐ Change **Addition** GRUBER, MARJORIE ESTER DAHLGREN NAME NAME 5665 1516 SAVTERN DRIVE BADENCT STREET ADDRESS STREET ADDRESS CITY-ST-ZIF FORT MYERS, FL 33919 CITY-ST-ZIP FTM 33919 FL TITLE ☐ Defete TITLE ☐ Change ■ Addition

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 617, 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP