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

## **FILED** Apr 17, 2006 8:00 am Secretary of State

04-17-2006 90362 005 \*\*\*\*61.25

## DOCUMENT # N02015

1. Entity Name
WHISPERING WOODS OF CORAL SPRINGS
HOMEOWNERS ASSOCIATION INC.



HOMEON	HOINIEOWINERS ASSOCIATION, INC.				<b>′</b>				
Principal Place of Business  % SUNRAE MANAGEMENT SERVICES, INC. 7071 WEST COMMERICAL BLVD., #2B TAMARAC, FL 33319 US  Mailing Address  % SUNRAE MANAGEMENT SE 7071 WEST COMMERICAL BL TAMARAC, FL 33319 US			IL BLVD.			<b>                                   </b>			
2. Principal Place of Business  Clo Benchmanc Property Mant Clo Benchmanc Property Mg									
Suite, Apt. 7932 L	#, etc.	Suite, Apt. #, etc.	20	Jesa	03312006 Ch	ig-NP	CR2E037	(11/05)	
City & State City & State				- C1	4. FEI Number 59-278541	3			plied For
Zip	SPN95 FL Country	COZLI SYN	Coun	itry			<b>\$8</b>	3.75 Addi	t Applicable itional
3300)	10(1)/2/	33067	$\upsilon_{\cdot}$	S. A.	5. Certificate of Sta		Fe	e Required	
<u> </u>	6. Name and Address of Current Re	7. Name and Add							
SUNRAE MANAGEMENT SERVICES, INC. 7071 WEST COMMERCIAL BLVD., #2B Street Address					manc Proper s (P.O. Box Number is N	Not Acceptable	<u>nagem</u>	410	, inc.
TAMARAC, FL 33319				7932 WILES ROad					
	1.			COral	Spnngs		FL	Zip Code 330	רטו
8. The above named entity sufficient 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.									
ine congan	ions or registered agent.						, ,		
SIGNATURE :	/ <del>/</del>						4/4/0	عاد	
	Signature, typed or printed name of registered agent are	d title if applicable. (NOTE:	: Registered	Agent signature requi	ired when reinstating)		DATE		
Filling Fee is \$61.25  Due by May 1, 2006  9. Election Campaign Final Trust Fund Contribution					\$5.00 May Be Added to Fees		ake check p ida Departm		
10.	OFFICERS AND DIRE	CTORS	11.		ADDITIONS/CHANG	ES TO OFFICE	RS AND DIRE	CTORS IN	_
THILE	P V	☐ Delete	TITLE		irector Innasar	nio D		] Change	Notition
NAME STREET ADDRESS	NAIL, ELVIS 5505 LEITNER DRIVE WEST			ADDRESS A7	75 Leime	2 BALL	i wes	; <del></del>	
CITY-ST-ZIP	CORAL SPRINGS, FL 33067		CITY-S		mul spnn		FL	337	د ماد
TITLE	S DAME! A	☐ Delete	TITLE	oa.	le prisi d gano, jam	ent	Ī.	Change	Addition
NAME STREET ADDRESS	EPSTEIN, PAMELA 7605 NW 51 PLACE		NAME STREET	TADDRESS 77	72 NW 52	PIGCE			
CITY-ST-ZIP	CORAL SPRINGS, FL 33067		CITY-S	ST-ZIP CU	MU Sonnes	126	رم <i>ي دو</i>		
TITLE	VP	Delete	TITLE			,		Change	☐ Addition
NAME STREET ADDRESS	BENCKENSTEIN, JOHN 4661 LEITNER DR W		NAME	T ADDRESS					
CITY-ST-ZIP	CORAL SPRINGS, FL 33067		CITY-S						
TITLE	T 🗸	☐ Delete	TITLE				Ę	Change	Addition
NAME	WRAY, GARFIELD		NAME						
STREET ADDRESS CITY-ST-ZIP	7668 NW 50 COURT CORAL SPRINGS, FL 33067		CITY-S	T ADDRESS ST-ZIP					ĺ
TITLE	D	<b>□</b> Delete	TITLE					Change	Addition
NAME	PAGANO, JIM		NAME						
STREET ADDRESS	7772 NW 52 PLACE		STREE	T ADDRESS					
CITY+ST-ZIP	CORAL SPRINGS, FL 33067		TITLE	VI - EII				] Change	Addition
TITLE NAME		☐ Delete	NAME				L	י טאוואני ר	Audiduit
STREET ADDRESS				T ADDRESS					}
CHTY-ST-ZIP				ST-ZIP	<del></del>				
indicated of the cor	certify that the information supplied with t I on this report or supplemental report is t reporation or the receiver or trustee empor or on an attachment with an address, wi	rue and accurate and that maked the second to execute this report a	ny signatu as require	ure shall have th	he same legal effect as i	if made under i	oath; that I am	an officer	or director

V.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/04

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