

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 03, 2009
Secretary of State**

DOCUMENT# N07000001000

Entity Name: THE VILLAGE AT WHISPERWOOD CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O PALMER HOMES, INC.
620 N. WYMORE ROAD, SUITE 250
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

C/O PALMER HOMES, INC.
620 N. WYMORE ROAD, SUITE 250
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 51-0637200 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PALMER, PAUL C JR
% PALMER HOMES, INC.
620 N. WYMORE ROAD, SUITE 250
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PALMER, JOHN B
Address: 7053 UNIVERSITY BLVD
City-St-Zip: WINTER PARK, FL 32792

Title: VD () Delete
Name: PALMER, RODNEY W
Address: 7053 UNIVERSITY BLVD
City-St-Zip: WINTER PARK, FL 32792

Title: STD (X) Delete
Name: PALMER, PAUL C JR
Address: 7053 UNIVERSITY BLVD
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PALMER, JOHN B
Address: 620 N WYMORE ROAD STE 250
City-St-Zip: MAITLAND, FL 32751

Title: STD (X) Change () Addition
Name: PALMER, PAUL C JR
Address: 620 N WYMORE ROAD STE 250
City-St-Zip: MAITLAND, FL 32751

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN B. PALMER

PD

02/03/2009

Electronic Signature of Signing Officer or Director

_____ Date