## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 28, 2005 8:00 am Secretary of State 04-28-2005 90184 049 \*\*\*\*61.25

DOCUMENT # N07294  1. Entity Name WHIPPOORWILL RUN TOWNHOUSES ASSOCIATION, INC.  Principal Place of Business 2989 BENT PINE DR  835 20TH PLACE									140042	52		
FT PIERCE, F		US		20 <b>TH PLACE</b> O BEACH, FL 3296	50					<b>i</b> ) <b>831</b> 0 <b>8</b> 210 817		
2. Principal Place of Business			3. Mai	3. Mailing Address								
Suite, Apt. #, etc.			St	Suite, Apt. #, etc.				01192005	Chg-NP	CR2E0	37 (10/03)	
City & State			Ci	City & State				4. FEI Number 65-0403				oplied For of Applicable
Zip		Country	Zip		Cou	Country		5. Certificate o	f Status Desired		\$8.75 Add	ditional
	6. Name	and Address of Curre	nt Register	ed Agent				7. Name and	Address of New	Registered .	Agent	
CURRY, JAMES T						Name						
2989 BENT PINE DR FT PIERCE, FL 34951					Street Address			P.O. Box Number	is Not Acceptab	le)		•
						City				FL	Zip Cod	e
8. The above named entity submits this statement for the purpose of changing its registere						ad office o	r conintos	ad acces b-sb	T= 45 - 01-4 - 1 C		t 10	
SIGNATURE .		ox printed name of registered eg	pent and title if app	<del></del>			ture required	when reinstating)		DATE		
	Due by M		9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees	Fla	rida Depar	c payable t tment of S	lete	
TITLE	VPD	OFFICERS AND	DIRECTORS		11.				NGES TO OFFICE			
NAME	WEAVER,	IVAN		☐ Delete	NAM		Wea	ver, IVa	4		Change	Addition
STREET ADORESS CITY-ST-ZIP	3009 BEN1	T PINE DRIVE E, FL 34951			STRE	ET ADDRESS	300 9 E.F	Bent Pi	.4 ne Driv- F L 349	e -/		
TITLE	PD			☐ Delete	mu		, <u>, , , , , , , , , , , , , , , , , , </u>	raver	1. 6 7/7	3/	☐ Change	Addition
NAME STREET ADDRESS	CURRY, JA 2989 BEN1				NAM							
CITY-ST-ZIP	I	E, FL 34951				ET ADORESS -St-ZIP						
TITLE NAME	DT SHUNK, R	OBERT		☐ Delete	TITLE						্ আনু	Addition
STREET ADDRESS	2973 BENT	PINE DR	-			c et address <sub>(</sub>						
CITY-ST-ZIP	FT PIERCE	E, FL 34951				-ST-ZIP	1/97					
NAME	HEARN, G	REG		2 Belete	TITLE		Law	vence, b	29918		☐ Change	Attition
STREET ADORESS	2941 BENT				STRE	ET ADDRESS	299	a Bent	Pine Dri	ve /		
CITY-ST-ZIP		F, FL 34951				-ST-ZIP	Pt.	PIEUCE	FL 349	75/		
NAME	DS KONEVAL	GEORGE		C Delete	TITLE NAM!		100	holl I	om Pine Dri		☐ Change	□ Addition
STREET ADDRESS	2959 BEN1					ET ADDRESS	200	19 Bent	Pine Dri	ve		
CITY-ST-ZIP	FT PIERCE	, FL 34951				·ST-ZIP	Ft.	Prever	S. F 1.3	4951	•	
TITLE				☐ Delete	mu				<del>)</del>		☐ Change	Addition
NAME STREET ADDRESS					NAM	ET ADDRESS						
CITY-ST-ZIP					1	-ST-ZIP						
12. I hereby o	ertify that the	information supplied w	vith this filing	does not qualify for	the exer	nption sta	ted in Sec	ction 119,07(3)(i).	Florida Statutes.	I further cer	ify that the in	formation

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.

SIGNATURE: \_

TURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR