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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 30 AM 10:41

DOCUMENT # **N23009** (6)

1. Corporation Name
THE WHISTLER CONDOMINIUM, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business: **P O BOX 6727 JACKSONVILLE FL 32236 US**
Mailing Address: **P O BOX 6727 JACKSONVILLE FL 32236 US**

3. Date Incorporated or Qualified: **10/14/1987**
3a. Date of Last Report: **05/01/1994**
4. FEI Number: **59-2895041**
Applied For: Not Applicable:

2. Principal Place of Business: **21 P.O. Box 6727**
2a. Mailing Address: **26 P.O. Box 6727**
22. Suite, Apt. #, etc.:
27. Suite, Apt. #, etc.:
23. City, State: **Jax, Fla 32236**
28. City, State: **Jax Fla 32236**
24. Zip: **32236**
25. Country: **US**
29. Zip: **32236**
30. Country: **US**

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: **BAILEY, ERNESTINE 2954B PARK STREET JACKSONVILLE FL 32205**
10. Name and Address of New Registered Agent: **BAILEY, ERNESTINE 2954B PARK STREET JACKSONVILLE FL 32205**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.
SIGNATURE: **Dawn M. Marsh** (D.M. MARSH) **3-20-95**
DATE: **3-20-95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	NAME: BAILEY, ERNESTINE STREET ADDRESS: 2954B PARK ST JACKSONVILLE FL	11 TITLE: PD	12 NAME: BEVERLY, PATRICIA 13 STREET ADDRESS: 2954 A PARK ST JAX, FL 32205
TITLE: TD	NAME: CHAPMAN, CHARLES STREET ADDRESS: 2952 B PARK ST JACKSONVILLE FL	21 TITLE: VD	22 NAME: BAILEY, ERNESTINE 23 STREET ADDRESS: 2954 B PARK ST JAX, FL 32205
TITLE: SD	NAME: BEVERLY, PATRICIA STREET ADDRESS: 2954A PARK STREET JACKSONVILLE FL	31 TITLE: TD	32 NAME: MARSH DAWN 33 STREET ADDRESS: 2954 B PARK ST. JAX FL 32205
TITLE:	NAME:	41 TITLE: SD	42 NAME: CHAPMAN CHARLES 43 STREET ADDRESS: 2952 B PARK ST. JAX. FLA. 32205
TITLE:	NAME:	51 TITLE:	52 NAME:
TITLE:	NAME:	61 TITLE:	62 NAME:
TITLE:	NAME:	63 TITLE:	64 NAME:

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made in person. 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Dawn M. Marsh (Dawn M. Marsh) (D.M. MARSH)** **3-20-95** **384-8328**
DATE: **3-20-95**
Signature of Registered Agent: **Patricia Beverly**