FILED 2000 UNIFORM BUSINESS REPORT (UBR) Feb 07, 2000 8:00 am Secretary of State **DOCUMENT # N29109** 1. Entity Name 02-07-2000 90074 036 ****61.25 WHISPERWOOD MANUFACTURED HOMEOWNERS ASSOCIATION. Mailing Address Principal Place of Business 3070 WHISPER BLVD. 2979 TURTLE DOVE TRAIL DELAND FL 32724 DELAND FL 32724-7403 2. Principal Place of Business 3. Mailing Address P. O. BOX Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2930705 Not Applie Country Zip Country \$8.75 Additional 5. Certificate of Status Desired . -- [Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) MCCORKLE, NORMAN E 2979 TURTLE DOVE TRAIL 2995 TURTLE DOVE **DELAND FL 32724** 8. The above named entity submits this statement for the purpose of chapging its registered office or registered agent, or both, in the state of Florida SIGNATURE Signature, typed or prin (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change VD. ☐ Delete TITLE TITLE NAME HALL, FRITZ NAME 3009 BAY SPRINGS TRL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-ZIP DELAND FL 32724 Change TITLE ☐ Delete TITLE MCCORKLE, NORMAN E STREET ADDRESS 2979 TURTLE DOVE TRAIL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DELAND FL 32724 SD ☐ Delete TITLE MARTIN. ROBERT NAME NAME STREET ADDRESS STREET ADDRESS 2967 TURTLE DOVE TRL CITY-ST-7IP CITY-ST-ZIP DELAND FL 32724 \Box . TITLE TD ☐ Delete TITLE ☐ Change MADSON, INGOLF L STREET ADDRESS STREET ADDRESS 4135 BALD CYPRESS DR CITY-ST-ZIP CITY-ST-ZIP DELAND FL 32724 ☐ Change TITLE TITLE MORRIS, RUDY NAME STREET ADDRESS 3063 TURTLE DOVE TRAIL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DELAND FL 32724 TITLE ☐ Delete TITLE ☐ Change \Box CASPER, LINDA NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, i further certify that the 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 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 . changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

3133 BAY SPRINGS TRAIL

DELAND FL

STREET ADDRESS

CITY-ST-7IP

SIGNATURE: INGOTALIA OSTALO

Addition to Document # N29109 Year 2000 Whisperwood Manufactured Homeowners Association

10 OFFICERS AND DIRECTORS 11 ADD/CHANGES TO OFF. & DIR. IN 10 D Deeb-Loffman, Frances 3138 Deer Trail Deland, Fl.32724 D SD Ford, Alfred X Change Addition 3122 Turtle Dove Trail Deland, Fl. 32724 X Delete Gilbert, Anna 3059 Whisper Blvd. Deland, Fl. 32724 X Delete Hempfling, George 3144 Hickory Tree Lane Deland, Fl. 32724 PD Change X Addition Simms, Jack 2995 Turtle Dove Trail Deland, Fl. 32724 D Change X Addition Davis, Jerrold 3130 Turtle Dove Trail Deland, Fl. 32724 D Change X Addition Carr, William 3126 Turtle Dove Trail Deland, Fl. 32724 D Change X Addition Stauffer, Robert 3008 Bay Springs Trail Deland, Fl. 32724