

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 768177 (8)
1. Corporation Name
WHISPER WALK SECTION A ASSOCIATION, INC.



Principal Place of Business
18967 MOONWIND DRIVE
BOCA RATON FL 33496-5024

Mailing Address
18967 MOONWIND DRIVE
BOCA RATON FL 33496-5024

3. Date Incorporated or Qualified
04/27/1983

3a. Date of Last Report
04/26/1995

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

4. FEI Number
59-2349680

5. Certificate of Status Desired
\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution
\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
☐ Yes ☒ No

10. Name and Address of New Registered Agent

DIEN, HYMAN
8900 RHEIMS ROAD
BOCA RATON FL 33496

LEON SEIGEL
8794 WINDROW WAY

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *[Signature]* DATE 5/4/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETED
<i>DE 1ST VICE - PRES.</i>	DIEN, HYMAN	8900 RHEIMS RD	BOCA RATON FL	<input type="checkbox"/>
	SD	FURMAN, RUTH	8720 RHEIMS ROAD	<input type="checkbox"/>
		BOCA RATON FL		<input type="checkbox"/>
	<i>DE PRESIDENT</i>	SEIGEL, LEON	8794 WINDROW WAY	<input type="checkbox"/>
		BOCA RATON FL		<input type="checkbox"/>
	<i>DE</i>	FEINBERG, JEROME	18889 SCHOONER DR	<input checked="" type="checkbox"/>
		BOCA RATON FL		<input type="checkbox"/>
	<i>DE</i>	KALIN, SHELDON	18865 ARGOSY DRIVE	<input checked="" type="checkbox"/>
		BOCA RATON FL		<input type="checkbox"/>
	<i>DE 2ND VICE - PRES.</i>	SIEGEL, HERBERT	18765 CANDLEWALK DR	<input type="checkbox"/>
		BOCA RATON FL		<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETED
1.1	1.2	1.3	1.4	<input type="checkbox"/>
2.1	2.2	2.3	2.4	<input type="checkbox"/>
3.1	3.2	3.3	3.4	<input type="checkbox"/>
4.1	4.2	4.3	4.4	<input type="checkbox"/>
5.1	5.2	5.3	5.4	<input type="checkbox"/>
6.1	6.2	6.3	6.4	<input type="checkbox"/>

TREASURER
SEYMOUR R. LEVINE
18769 ARGOSY DRIVE
BOCA RATON, FL. 33496

DIRECTOR
CLAIRE FELDMAN
18862 SCHOONER DRIVE
BOCA RATON, FL. 33496

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 119.07(3)(k), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SEYMOUR R. LEVINE TREAS. *[Signature]* 4/1/96 (467) 483-7640

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)