

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747691

FILED  
Mar 08, 2008  
Secretary of State

**Entity Name:** WHIPSAW CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

302 NORTH GARFIELD AVE  
DELAND, FL 32724 US

**New Principal Place of Business:**

**Current Mailing Address:**

302 NORTH GARFIELD AVE  
DELAND, FL 32724 US

**New Mailing Address:**

**FEI Number:** 59-3159900

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KING, DONNA J  
302 N. GARFIELD AVE.  
DELAND, FL 32724 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: DS ( ) Delete  
Name: ADAMS, ANN  
Address: 308 N GARFIELD AVE  
City-St-Zip: DELAND, FL 32724

Title: TD ( ) Delete  
Name: KING, DONNA J  
Address: 302 N GARFIELD AVE  
City-St-Zip: DELAND, FL 32724

Title: D ( ) Delete  
Name: CANO, JUAN J  
Address: 300 N. GARFIELD  
City-St-Zip: DELAND, FL 32721

Title: P ( ) Delete  
Name: ADAMS, BOBBY  
Address: 308 N. GARFIELD AVE  
City-St-Zip: DELAND, FL 32724

Title: D (X) Delete  
Name: SCHENK, MARILYN  
Address: 306 N GARFIELD AVE  
City-St-Zip: DELAND, FL 32724

Title: DVP ( ) Delete  
Name: LIESER, KIMBERLY  
Address: 304 N GARFIELD AVE  
City-St-Zip: DELAND, FL 32724

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: SCHENK, MARILYN  
Address: 306 N GARFIELD AVE  
City-St-Zip: DELAND, FL 32724

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

Title: DVP (X) Change ( ) Addition  
Name: CANO, JUAN J  
Address: 300 N. GARFIELD  
City-St-Zip: DELAND, FL 32721

Title: DP (X) Change ( ) Addition  
Name: ADAMS, BOBBY  
Address: 308 N. GARFIELD AVE  
City-St-Zip: DELAND, FL 32724

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

Title: DS (X) Change ( ) Addition  
Name: LIESER, KIMBERLY  
Address: 304 N GARFIELD AVE  
City-St-Zip: DELAND, FL 32724

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: DONNA J. KING

D

03/08/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date