

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729425

Entity Name: WHISPERING PINES CLUB, INC.**Current Principal Place of Business:**105 PONDEROSA PINES COURT
GEORGETOWN, FL 32139**Current Mailing Address:**113 SPANISH TRAIL
GEORGETOWN, FL 32139 US**FEI Number:** 59-1886612**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAM PRENDERGAST EA,
113 SPANISH TRAIL
GEORGETOWN, FL 32139 US*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**Officer/Director Detail :**

Title PRESIDENT
Name PRENDERGAST, WILLIAM
Address 113 SPANISH TRAIL
City-State-Zip: GEORGETOWN FL 32139

Title DIRECTOR
Name MICHELS, ELAINE
Address WHISPERING PINES CLUB, INC.
 105 PONDEROSA PINES COURT
City-State-Zip: GEORGETOWN FL 32139

Title TREASURER
Name PRENDERGAST, WILLIAM J
Address WHISPERING PINES CLUB, INC.
 105 PONDEROSA PINES COURT
City-State-Zip: GEORGETOWN FL 32139

Title VP
Name MICHELS, ELAINE
Address WHISPERING PINES CLUB, INC.
 105 PONDEROSA PINES COURT
City-State-Zip: GEORGETOWN FL 32139

Title SECRETARY
Name MICHELS, ELAINE
Address WHISPERING PINES CLUB, INC.
 105 PONDEROSA PINES COURT
City-State-Zip: GEORGETOWN FL 32139

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM PRENDERGAST

PRESIDENT

06/10/2022

Electronic Signature of Signing Officer/Director Detail_____
Date