

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747691

Entity Name: WHIPSAW CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**308 NORTH GARFIELD AVE
DELAND, FL 32724**Current Mailing Address:**308 NORTH GARFIELD AVE
DELAND, FL 32724 US**FEI Number:** 59-3159900**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NIGOSANTI, JEANETTE E
308 N. GARFIELD AVE.
DELAND, FL 32724 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:** JEANETTE E NIGOSANTI

01/18/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SCHENK, MARILYN
Address 306 N GARFIELD AVE
City-State-Zip: DELAND FL 32724

Title DIRECTOR, TREASURER
Name NIGOSANTI, JEANETTE E
Address 308 NORTH GARFIELD AVE
City-State-Zip: DELAND FL 32724

Title DIRECTOR, SECRETARY
Name CANO, JUAN J
Address 300 N. GARFIELD
City-State-Zip: DELAND FL 32721

Title DIRECTOR
Name SABATINI, EDWARD G
Address 304 N GARFIELD AVENUE
City-State-Zip: DELAND FL 32724

Title PRESIDENT
Name NIGOSANTI, RICHARD
Address 308 N GARFIELD AVENUE
City-State-Zip: DELAND FL 32724

Title VP
Name ROWAN, TIM
Address 302 N GARFIELD AVE
City-State-Zip: DELAND FL 32724

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: JEANETTE NIGOSANTI**TREASURER**

01/18/2023

Electronic Signature of Signing Officer/Director Detail

Date