2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 754186

Entity Name: WHISPERING TRAILS HOMEOWNERS ASSOCIATION, INC.

FILED
Dec 05, 2018
Secretary of State
CC0993200265

Current Principal Place of Business:

1818 AUSTRIALIAN AVE WEST PALM BEACH. FL 33409

Current Mailing Address:

P O BOX 7574

JUPITER, FL 33468-7574 US

FEI Number: 65-0051134 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DICKER, KRIVOK & STOLOFF, PA 1818 AUSTRALIAN AVE WEST PALM BEACH, FL 33409 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 TREASURER Title PRESIDENT

NameIMSE, JESSICA ANameGOODMAN, GLENNAddress6171 WOOD LAKE RDAddress19638 RED MAPLE LNCity-State-Zip:JUPITER FL 33458City-State-Zip:JUPITER FL 33458

Title OFFICER Title OFFICER

NameMAYS, LISANamePELCHEN, GLORIAAddress19615 TRAILS END TERRACEAddress6079 WOOD LAKE RD

City-State-Zip: JUPITER FL 33458 City-State-Zip: JUPITER FL 33458

Title VP Title SECRETARY

NameBLAKISTON, HENRYNameESPENSHIP, SCOTTAddress19558 TRAILS END TERAddress6361 WOOD LAKE RDCity-State-Zip:JUPITER FL 33458City-State-Zip:JUPITER FL 33458

Title OFFICER

Name CARLTON, LISA

Address 6152 WOOD LAKE RD
City-State-Zip: JUPITER FL 33458

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: JESSICA IMSE TREASURER

12/05/2018

Electronic Signature of Signing Officer/Director Detail

Date