

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 763434

**FILED**  
**Mar 15, 2024**  
**Secretary of State**  
**7746974744CC**

**Entity Name:** WHISPERING OAKS ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

35142 WHISPERING OAKS BLVD  
RIDGE MANOR , FL 33523

**Current Mailing Address:**

35142 WHISPERING OAKS BLVD  
RIDGE MANOR, FL 33523 US

**FEI Number: 59-2392285**

**Certificate of Status Desired: Yes**

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

ELZERMAN, JOHN  
35142 WHISPERING OAKS BLVD  
RIDGE MANOR, FL 33523 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: JOHN ELZERMAN**

**03/15/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name ELZERMAN, JOHN  
Address 35142 WHISPERING OAKS BLVD  
City-State-Zip: RIDGE MANOR FL 33523

Title PRESIDENT, VP  
Name JOHNSON, RICHARD  
Address 35142 WHISPERING OAKS BLVD  
City-State-Zip: RIDGE MANOR FL 33523

Title TREASURER  
Name CHAPMAN, SAYBRA  
Address 35142 WHISPERING OAKS BLVD  
City-State-Zip: RIDGE MANOR FL 33523

Title DIRECTOR  
Name YODER, JOHN  
Address 35142 WHISPERING OAKS BLVD  
City-State-Zip: RIDGE MANOR FL 33523

Title DIRECTOR  
Name PARLOW, EUGENIA C  
Address 35142 WHISPERING OAKS BLVD  
City-State-Zip: RIDGE MANOR FL 33523

*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: JOHN ELZERMAN**

**PRESIDENT**

**03/15/2024**

Electronic Signature of Signing Officer/Director Detail

Date