

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005746

Entity Name: WHISPER CREEK OF CLAY COUNTY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1637 RACE TRACK ROAD
SUITE 206
ST. JOHNS, FL 32259

Current Mailing Address:

5455 A1A SOUTH
SUITE 3
ST. AUGUSTINE, FL 32080 US

FEI Number: 03-0374990

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAY MANAGEMENT SERVICES, INC
5455 A1A SOUTH
SUITE 3
ST. AUGUSTINE, FL 32080 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 T
Name CALHOUN, BRIAN
Address 5455 A1A SOUTH
City-State-Zip: ST. AUGUSTINE FL 32080

Title P
Name BARREIRA, STEVEN
Address 5455 A1A S
City-State-Zip: ST. AUGUSTINE FL 32080

Title VP
Name SHERRER, JOSHUA DOUGLAS
Address 5455 A1A SOUTH
City-State-Zip: ST. AUGUSTINE FL 32080

Title D
Name RICCI, SHANE T
Address 5455 A1A SOUTH
City-State-Zip: ST. AUGUSTINE FL 32080

Title S
Name MCKENZIE, PRESCOTT
Address 5455 A1A SOUTH
SUITE 3
City-State-Zip: ST. AUGUSTINE FL 32080

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: SHANE RICCI

DIRECTOR

03/17/2016

Electronic Signature of Signing Officer/Director Detail

Date