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: GARY CAMPBELL

Electronic Signature of Signing Officer/Director Detail

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:

Officer/Director Detail :				
Title	PRESIDENT	Title	VPT	
Name	CAMPBELL, GARY	Name	ANDERSON, MARY	
Address	1072 PENINSULA DR	Address	POST OFFICE BOX 444	
City-State-Zip:	SLIDELL LA 70460	City-State-Zip:	WAVELAND MS 39576	
T :41-				
Title	S			
Name	DAVIES, JOHN			
Address	65 RED MAPLE COURT			
City-State-Zip:	SANTA ROSA BEACH FL 32459			

SANTA ROSA BEACH, FL 32459 US

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09097

Entity Name: WHISPERING SANDS ASSOCIATION, INC.

Current Principal Place of Business:

6015 W CO HWY 30A SANTA ROSA BEACH. FL 32459

Current Mailing Address:

5200 W CO HWY 30A SANTA ROSA BEACH. FL 32459

FEI Number: 59-2668718

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

DUNE ALLEN REALTY, INC. 5200 W CO HWY 30A

FILED Jan 15, 2018 Secretary of State CC1337096585

Certificate of Status Desired: Yes

PRESIDENT

Date

01/15/2018