

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005044

Entity Name: WHISPER LAKES UNIT 1 HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

C/O SRK RESIDENTIAL COMMUNITIES
6925 LAKE ELLENOR DR SUITE 115
ORLANDO, FL 32809

Current Mailing Address:

C/O SRK RESIDENTIAL COMMUNITIES
6925 LAKE ELLENOR DR SUITE 115
ORLANDO, FL 32809 US

FEI Number: 59-3224076

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SRK RESIDENTIAL COMMUNITIES, LLC.
C/O SRK RESIDENTIAL COMMUNITIES
6925 LAKE ELLENOR DR SUITE 115
ORLANDO, FL 32809 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 VD
Name MESSINA, BRENDA
Address C/O SRK RESIDENTIAL COMMUNITIES
6925 LAKE ELLENOR DR SUITE 115
City-State-Zip: ORLANDO FL 32809

Title PD
Name DUFFY, JANE
Address C/O SRK RESIDENTIAL COMMUNITIES
6925 LAKE ELLENOR DR SUITE 115
City-State-Zip: ORLANDO FL 32809

Title STD
Name KLOSTERMAN, STEPHEN
Address C/O SRK RESIDENTIAL COMMUNITIES
6925 LAKE ELLENOR DR SUITE 115
City-State-Zip: ORLANDO FL 32809

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: STEPHEN KLOSTERMAN

TREASURER

02/28/2019

Electronic Signature of Signing Officer/Director Detail

Date