

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000224006

**Entity Name:** WHISPERING PINES PLANTATION, LLC

**Current Principal Place of Business:**

4739 PATCH ROAD  
ORLANDO, FL 32822

**Current Mailing Address:**

4739 PATCH ROAD  
ORLANDO, FL 32822 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

SMITH, ESQ, KEITH C  
ONE LAKE MORTON DR  
LAKELAND, FL 33801 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

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	EVANS, BRETT C	Name	EVANS, BROCK K
Address	4156 BENEDICT AVENUE	Address	620 GAITLIN AVE
City-State-Zip:	ORLANDO FL 32833	City-State-Zip:	ORLANDO FL 32806

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BRETT C EVANS

MGR

04/09/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date