

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708375

FILED
Apr 20, 2011
Secretary of State

Entity Name: WHISPERING PALMS CONDOMINIUM INC.

Current Principal Place of Business:

ASSOCIATED PROPERTY MGMT.
1928 LAKE WORTH RD.
LAKE WORTH, FL 33461 US

New Principal Place of Business:

Current Mailing Address:

ASSOCIATED PROPERTY MGMT.
1928 LAKE WORTH RD.
LAKE WORTH, FL 33461 US

New Mailing Address:

FEI Number: 23-7247524 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DICKER, EDWARD ESQ
1818 AUSTRALIAN AVE. SOUTH
SUITE 400
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: FUNK, FRANK
Address: 670 BLUEBERRY DR.
City-St-Zip: WELLINGTON, FL 33414

Title: VD
Name: HALICEK, FRANK
Address: PO BOX 2422
City-St-Zip: SECAUCUS, NJ 07096

Title: TD
Name: KERR, ROBERT
Address: 1320 12TH AVE. SO. #13
City-St-Zip: LAKE WORTH, FL 33460

Title: SD
Name: BAHAMONDES, SILVIA
Address: 5265 BRISATA CIRCLE #W
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D
Name: LINCOLN, SANDRA
Address: 1320 12TH AVENUE SOUTH #3
City-St-Zip: LAKE WORTH, FL 33460

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: BRIAN MCENTEE

APM

04/20/2011

Electronic Signature of Signing Officer or Director

Date