

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709378

FILED
Apr 25, 2005
Secretary of State

Entity Name: WHITEHALL ASSOCIATION, INC.

Current Principal Place of Business:

478 TEQUESTA DRIVE
TEQUESTA, FL 334692580

New Principal Place of Business:

Current Mailing Address:

478 TEQUESTA DRIVE
TEQUESTA, FL 334692580

New Mailing Address:

478 TEQUESTA DRIVE
TEQUESTA, FL 33469

FEI Number: 59-6176951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRAND, CHRISTOPHER P
71 WILLOW RD
TEQUESTA, FL 33469 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: TD () Delete
Name: RINGOOT, ED
Address: 478 TEQUESTA DR
City-St-Zip: TEQUESTA, FL 33469

Title: PD () Delete
Name: HAYES, HERBERT
Address: 478 TEQUESTA DR
City-St-Zip: TEQUESTA, FL

Title: D () Delete
Name: ASTARITA, HARRY
Address: 478 TEQUESTA DRIVE
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: ROBBINS, HELEN
Address: 478 TEQUESTA DR
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: SWADE, PAUL
Address: 478 TEQUESTA DR
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: ROWSEY, ED
Address: 478 TEQUESTA DRIVE
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: WASSENAR, CAROL
Address: 478 TEQUESTA DR
City-St-Zip: TEQUESTA, FL 33469

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RUSSELL, BILL
Address: 478 TEQUESTA DRIVE
City-St-Zip: TEQUESTA, FL 33469

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HERB HAYES

PD

04/25/2005

Electronic Signature of Signing Officer or Director

Date