

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725744

FILED
Mar 11, 2007
Secretary of State

Entity Name: WHISKEY CREEK VILLAGE GREEN SECTION THREE ASSOCIATION INC

Current Principal Place of Business:

5544 PENDLEWOOD LANE
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

5544 PENDLEWOOD LANE
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ADAMS, JOSEPH E ESQ
14241 METROPOLIS AVE
SUITE 100
FT MYERS, FL 339120000 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: VP () Delete
Name: JACK, GIAMETTE
Address: 5540 PENDLEWOOD LANE
City-St-Zip: FT MYERS, FL 33919

Title: SD () Delete
Name: KNAPP, HELEN
Address: 1460 TREDEGAR DR
City-St-Zip: FT. MYERS, FL 33919

Title: D () Delete
Name: RICH, CARMEN
Address: 5564 PENDLEWOOD LN
City-St-Zip: FT MYERS, FL 33919

Title: SVP (X) Delete
Name: ILICH, PATRICIA
Address: 5548 HAMLET LN
City-St-Zip: FORT MYERS, FL 33919

Title: P () Delete
Name: HUNTER, WALLACE D
Address: 5570 PENDLEWOOD LN
City-St-Zip: FORT MYERS, FL 33919

Title: T () Delete
Name: JANSEN, MARJORIE
Address: 5560 PENDLEWOOD LANE
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: SURPRISE, JUDITH
Address: 5574 PENDLEWOOD LANE
City-St-Zip: FT MYERS, FL 33919

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: WALLACE D. HUNTER

P

03/11/2007

Electronic Signature of Signing Officer or Director

Date