

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725744

FILED  
Mar 19, 2009  
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: SURPRISE, JUDITH  
Address: 5574 PENDLEWOOD LANE  
City-St-Zip: FT 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: VP (X) Change ( ) Addition  
Name: GERALD, MICHELSON  
Address: 5541 HAMLET LANE  
City-St-Zip: FT MYERS, FL 33919

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

Title: D (X) Change ( ) Addition  
Name: WALKER, BRIAN  
Address: 5593 HAMLET LANE  
City-St-Zip: FT MYERS, FL 33919

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 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

PRES

03/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date