

728211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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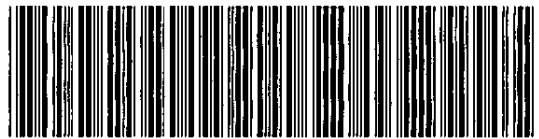
(Business Entity Name)

(Document Number)

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Amend
10 8/5/09

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Whiskey Creek Civic Association, Corp.

DOCUMENT NUMBER: 728211

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bernard Lamach
(Name of Contact Person)

(Firm/ Company)

1449 Whiskey Creek Drive, Suite 101
(Address)

Fort Myers, FL 33919
(City/ State and Zip Code)

blamach@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bernard Lamach at (239) 590-0395
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Whiskey Creek Civic Association, Corp.

(Name of Corporation as currently filed with the Florida Dept. of State)

728211

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City) Florida
(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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(Attach additional sheets, if necessary)

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

[illegible]

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**DOCUMENT# 728211****FILED**
Feb 22, 2009
Secretary of State**Entity Name: WHISKEY CREEK CMC ASSOCIATION, CORP.****Current Principal Place of Business:**1449 WHISKEY CREEK DR
FT. MYERS, FL 33919**New Principal Place of Business:****Current Mailing Address:**1449 WHISKEY CREEK DR
FT MYERS, FL 33919**New Mailing Address:**

FEI Number: 59-2389395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:LAMACH, BERNARD D
1449 WHISKERY CREEK DR.
STE 101
FORT MYERS, FL 33919 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: DP () Delete
Name: GILCHER, JEAN K
Address: 1449 WHISKEY CREEK DR
City-St-Zip: FT MYERS, FL 33919Title: DV () Delete *change to*
Name: OXNARD, ROBERT
Address: 1449 WHISKEY CREEK DR
City-St-Zip: FT MYERS, FL 33919Title: S () Delete
Name: BLACKETER, SUSAN
Address: 1449 WHISKEY CREEK DR
City-St-Zip: FT MYERS, FL 33919Title: DT () Delete
Name: LAMACH, BERNARD D
Address: 1449 WHISKEY CREEK DR
City-St-Zip: FT MYERS, FL 33919Title: D () Delete *change to*
Name: BENNETT, MICHELE
Address: 1449 WHISKEY CREEK DR
City-St-Zip: FT MYERS, FL 33919Title: D () Delete
Name: D'ALTRUI, AMY
Address: 1449 WHISKEY CREEK DR
City-St-Zip: FT MYERS, FL 33919**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: D () Change () Addition
Name: Robert Oxnard
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: D () Change () Addition
Name: Michele Bennett
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: BERNARD D LAMACH**DP****02/22/2009**

Electronic Signature of Signing Officer or Director

Date

The date of each amendment(s) adoption: February 4, 2009
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 7/29/09

Signature Susan Blacketer
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Susan Blacketer
(Typed or printed name of person signing)

Secretary
(Title of person signing)