2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2008
Secretary of State

DOCUMENT# 747572

Entity Name: WHISKEY CREEK VILLAGE GREEN CONDOMINIUM, SECTION NINE ASSOCIATION, INC.

Current Principal Place of Business:

5460 CAPBERN COURT
FT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 07145
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 59-1966672 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAPHAM, LOUANNE
5460 CAPBERN COURT
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:	SD	( ) Delete
Name:	LAPHAM, LOUANNE	
Address:	5460 CAPBERN COURT	
City-St-Zip:	FORT MYERS, FL 33919	
Title:	D	( ) Delete
Name:	CHRIST, ALEX,	
Address:	5456 CAPBERN CT, SW	
City-St-Zip:	FT. MYERS, FL 33919	
Title:	PD	( ) Delete
Name:	NEUMAN, BARBARA	
Address:	5583 BURNING CT	
City-St-Zip:	FT MEYERS, FL 33919	
Title:	D	( ) Delete
Name:	BAUGHMAN, KAREN	
Address:	5492 CAPBERN CT.	
City-St-Zip:	FORT MYERS, FL 33919	
Title:	T	( ) Delete
Name:	D'ACUNTO, FELICIA	
Address:	5448 CAPBERN CT SW	
City-St-Zip:	FORT MYERS, FL 33919	
Title:	DVP	( ) Delete
Name:	FALLERT, HELEN	
Address:	5573 BURING COURT, SW	
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:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	MIDDLEKAUFF, PATRICIA	
Address:	5575 BURNING CT	
City-St-Zip:	FORT 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: FELICIA D'ACUNTO T 04/10/2008

Electronic Signature of Signing Officer or Director — Date