

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748069

FILED
Mar 20, 2009
Secretary of State

Entity Name: WHISKEY CREEK ADULT CONDOMINIUM, II ASSOCIATION, INC.

Current Principal Place of Business:

6719 WINKLER ROAD
SUITE #200
FORT MYERS, FL 33919

New Principal Place of Business:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD, SUITE #200
FORT MYERS, FL 33919

Current Mailing Address:

6719 WINKLER ROAD
SUITE #200
FORT MYERS, FL 33919

New Mailing Address:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER RD., SUITE #200
FORT MYERS, FL 33919

FEI Number: 59-2072287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER RD.
SUITE 200
FT. 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: T () Delete
Name: OPFERMAN, DOROTHY
Address: 6108 WHISKEY CREAK DR # 109
City-St-Zip: FORT MYERS, FL 33919

Title: P () Delete
Name: VOLPE, BOB
Address: 852 E PATTEN DR
City-St-Zip: PALATINE, IL 60074

Title: S () Delete
Name: LITTLE, PATRICIA
Address: 6116 WHISKEY CREEK #303
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: MACARI, LEN
Address: 6142 WHISKEY CREEK DR #617
City-St-Zip: FORT MYERS, FL 33919

Title: VP () Delete
Name: ZOPHY, WILLIAM
Address: 6146 WHISKEY CRK DR 730
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: OPFERMAN, DOROTHY
Address: 6108 WHISKEY CREEK DR # 109
City-St-Zip: FT MYERS, FL 33919

Title: PD (X) Change () Addition
Name: CLINTON, JIM
Address: 6146 WHISKEY CREEK DR. # 714
City-St-Zip: FT MYERS, FL 33919

Title: SD (X) Change () Addition
Name: LITTLE, PATRICIA
Address: 6116 WHISKEY CREEK #303
City-St-Zip: FORT MYERS, FL 33919

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

Title: VP (X) Change () Addition
Name: ZOPHY, WILLIAM
Address: 6146 WHISKEY CREEK DR #730
City-St-Zip: FORT MYERS, FL 33919

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: JIM CLINTON

PD

03/20/2009

Electronic Signature of Signing Officer or Director

Date