2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2012
Secretary of State

DOCUMENT# 748069

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

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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: PD
Name: NELSON, JUDY
Address: 6146 WHISKEY CREEK DR # 728
City-St-Zip: FT MYERS, FL 33919

Title: VP
Name: WHALEN, MIKE
Address: 6110 WHISKEY CREEK DR. # 223
City-St-Zip: FT MYERS, FL 33919

Title: TD
Name: OPFERMAN, DOROTHY
Address: 6108 WHISKEY CREEK DR. #109
City-St-Zip: FORT MYERS, FL 33919

Title: SD
Name: VANLANDINGHAM, WILDA
Address: 6147 WHISKEY CREEK DR #704
City-St-Zip: FORT MYERS, FL 33919

Title: D
Name: RUPPERT, STEVE
Address: 6150 WHISKEY CREEK DR #801
City-St-Zip: FORT MYERS, FL 33919

I hereby 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 all other like empowered.

SIGNATURE: DOROTHY OPFERMAN TD 02/07/2012
Electronic Signature of Signing Officer or Director — Date