2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2012
Secretary of State

DOCUMENT# 751281

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

Current Principal Place of Business:

6719 WINKLER RD.
STE. 200
FT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

C/O ALLIANT PROPERTY MANAGEMENT LLC
6719 WINKLER RD. STE. 200
FT MYERS, FL 33919

New Mailing Address:

FEI Number: 59-1975799 **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. STE. 200
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: PD
Name: KROUSCUP, MARILYN
Address: 5665 BOLLA CT
City-St-Zip: FORT MYERS, FL 33919

Title: VP
Name: CRAWFORD, TOM
Address: 5697 BOLLA COURT
City-St-Zip: FORT MYERS, FL 33919

Title: TD
Name: EMERY, ISABEL
Address: 5574 BURING COURT
City-St-Zip: FT. MYERS, FL 33919

Title: SD
Name: KELLY, BONITA
Address: 5675 BOLLA COURT
City-St-Zip: FT. MYERS, FL 33919

Title: D
Name: BOOKER, ANNETTE
Address: 5677 BOLLA COURT
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: ISABEL EMERY TD 02/03/2012

Electronic Signature of Signing Officer or Director — Date