PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **J93521**

1. Corporation Name

WHISPERWINDS, INC.

Principal Place of Busine
551 S.W. 63RD TERRACE
DI ANTATIONI EL 20017

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2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Mailing Address

551 S.W. 63RD TERRACE PLANTATION FL 33317

Mailing Address

Suite, Apt. #, etc.

City & State

26

27

28

Zip

Country

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90014 042 ***158.75



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□No

Not Applicable

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

Trust Fund Contribution

Personal Property Tax.

09/23/1987

59-2836055

4. FEI Number

MCKENNY, NANCY 551 SW 63RD TERRACE PLANTATION FL 33317 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD	24	25	29	30			Personal Property Tax. Yes No
MCKENNY, NANCY 531 SW 63RD TERRACE PLANTATION FL 33317 82 Street Address (P.O. Box Number is Not Acceptable)	=-1	9. Name and Address of C	urrent Registered Agent				10. Name and Address of New Registered Agent
STREET ADDRESS STRE	4700				81	Name	
STREET ADDRESS STRE	MCKI	ENNY NANCY					
PLANTATION FL 33317 84 City						Street A	ddress (P.O. Box Number is Not Acceptable)
SICHATURE SUBJECT ADDRESS STINEET ADDRESS							
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD OFFICERS AND DIRECTORS IN 12 TITLE PD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD OFFICERS AND DIRECTORS IN 12 TITLE PD OFFICERS AND DIRECTORS IN 12 INTITLE OFFICERS AND	PLANTATION FL 33317				83		
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD OFFICERS AND DIRECTORS IN 12 TITLE PD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD OFFICERS AND DIRECTORS IN 12 TITLE PD OFFICERS AND DIRECTORS IN 12 INTITLE OFFICERS AND							Ing. 7:- Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Suction 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Suction 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Suction 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Suction 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Suction 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Suction 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Suction 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and state in the proprietion accept the appointment as registered pagent. In all military to ped or printed name of registered agent and title if applicable. In all military to ped or printed name of registered agent and title if applicable. In all military to ped or printed name of registered agent and title if applicable. In all military to ped or printed name of registered agent and title if applicable. In all military to ped or printed name of registered agent and title if applicable. In all military to ped or printed name of registered agent and title if applicable. In all military to ped or printed name of registered agent and tit					84	City	FI 85 ZIP Code
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's doard of directors. Thereby accept the appointment as separated agent and size if appointment. As adecept the obligations of, Section 607 (5005, Florida Statutes.) SIGNATURE				t- Ot-t-t the	1		· · · · · · · · · · · · · · · · · · ·
Signature, typed or printed name of registered agent and title if registered agent agent and title if registered agent and title if registered agent agent agent and title if registered agent and title if registered agent agent and title if registered agent agent agent agent and title if registered agent	office or re	edistered agent or both in the S	State of Florida. Such chan	de was authorize	a by i	ine corpoi	ration's board of directors. I hereby accept the appointment as registered
12.	SIGNATURE						
TITLE						t signature re	Quita Wildir Tollisating)
MCKENNEY, WILLIAM J. STREET ADDRESS STOTY- ST-ZIP TITLE VSD NAME MCKENNEY, NANCY M. STREET ADDRESS STS 1 S.W. G3RD TERR 12 ITILE VSD NAME MCKENNEY, NANCY M. STREET ADDRESS STS 1 S.W. G3RD TERR 22 SAME 23 STREET ADDRESS STS 1 S.W. G3RD TERR 24 CITY- ST-ZIP TITLE T NAME MCKENNY, NANCY M. STREET ADDRESS CITY- ST-ZIP MCKENNY, NANCY M. STREET ADDRESS CITY- ST-ZIP TITLE MCKENNY, NANCY M. STREET ADDRESS CITY- ST-ZIP TITLE MAME MA	12.				•	1	
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CITY-ST-ZIP	STREET ADDRESS	•		1.3 5	TREET	ADDRESS	
TITLE	' '	*		1.4 0	UTY-SI	r-ZIP	·
NAME MCKENNEY, NANCY M.	 			ELETE 2.11	TTLE		☐ Change ☐ Addition
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CITY-ST-ZIP				2.3 5	TREET	ADDRESS	
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STREET ADDRESS	NAME		* "%	5.21	NAME		•
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	STREET ADDRESS			6.3	STREET	ADDRESS	
CITY-ST-ZIP 6.4 CITY-ST-ZIP	CITY-ST-ZIP_						
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an	14. I hereby o	certify that the information suppl	ied with this filing does not	qualify for the ex	empti	on stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information

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officer or director of the corporation or the receiver or trustee empowered to execute this report as a required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

Andrew Andrews

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