

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 11, 2007
Secretary of State

DOCUMENT# N00478

Entity Name: WHITNEY LAKES HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**AMERI-TECH REALTY
1799-B NORTH BELCHER
CLEARWATER, FL 33765**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 14357
CLEARWATER, FL 33766**New Mailing Address:****FEI Number:** 59-2379035**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**AMERI-TECH REALTY INC
MICHAEL G. PEREZ PRESIDENT
1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765 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 () Delete
Name: EVANS, SAM
Address: 1947 WHITNEY WAY
City-St-Zip: CLEARWATER, FL 33760**Title:** D () Delete
Name: FORD, PATRICIA
Address: 10033 9 ST N. 2ND FL
City-St-Zip: SAINT PETERSBURG, FL 33716**Title:** TD () Delete
Name: MCLEOD, DONNA
Address: 10033 9TH STREET NORTH 2ND FLOOR
City-St-Zip: SAINT PETERSBURG, FL 33716**Title:** VPD () Delete
Name: OTT, ROSE
Address: 10033 9TH ST NORTH 2ND FLOOR
City-St-Zip: ST PETERSBURG, FL 33716**Title:** SD () Delete
Name: DATTOLI, CAROL
Address: 1924 WHITNEY WAY
City-St-Zip: CLEARWATER, FL 33760**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** SD (X) Change () Addition
Name: FORD, PATRICIA
Address: 10033 9 ST N. 2ND FL
City-St-Zip: SAINT PETERSBURG, FL 33716**Title:** TD (X) Change () Addition
Name: MCLEOD, DONNA M
Address: 10033 9TH STREET NORTH 2ND FLOOR
City-St-Zip: SAINT PETERSBURG, FL 33716**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: STOKES, PATRICIA
Address: 1921 WHITNEY WAY
City-St-Zip: CLEARWATER, FL 33760

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: SAM EVANS

PD

09/11/2007

Electronic Signature of Signing Officer or Director

Date