

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008068

FILED
Jan 06, 2009
Secretary of State

Entity Name: WHISPER CREST OWNERS ASSOCIATON, INC.

Current Principal Place of Business:

2605 S.W. 33RD STREET, BLDG #200
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

2605 S.W. 33RD STREET, BLDG #200
OCALA, FL 34474

New Mailing Address:

FEI Number: 51-0452511

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIRKPATRICK, KEN
2605 S.W. 33RD STREET, #200
OCALA, FL 34474 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: TD () Delete
Name: KIRKPATRICK, KEN
Address: 8235 SE 15 CT
City-St-Zip: OCALA, FL 34480

Title: SD () Delete
Name: TURNER-KELLY, MARILYN
Address: 8280 S.E. 15TH COURT
City-St-Zip: OCALA, FL 34480

Title: PD (X) Delete
Name: STIVERSON, JOHN S
Address: 8225 S.E. 15TH COURT
City-St-Zip: OCALA, FL 34480

Title: VD (X) Delete
Name: WEICHENS, CHRISTOPHER
Address: 8064 SE 15TH CT
City-St-Zip: OCALA, FL 34480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: KIRKPATRICK, KEN
Address: 8235 SE 15 CT
City-St-Zip: OCALA, FL 34480

Title: PD (X) Change () Addition
Name: WEICHENS, CHRISTOPHER
Address: 8064 S.E. 15TH COURT
City-St-Zip: OCALA, FL 34480

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

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

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: KEN KIRKPATRICK

STD

01/06/2009

Electronic Signature of Signing Officer or Director

Date