## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000007131

FILED Mar 01, 2004 Secretary of State

Entity Name: WHITNEY MEADOWS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	NST STE 600 A, FL 34237			
urrent Mailing Address:		New Mailing Address:		
	NST STE 600 A, FL 34237			
I Number	: 65-1182382	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
ERRILL,	WILLIAM W III			
	NST STE 600 A, FL 34237			
ARASOT	NST STE 600 A, FL 34237	ubmits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
ARASOT ne above the State	NST STE 600 A, FL 34237 named entity se of Florida.			
ARASOT ne above the State	NST STE 600 A, FL 34237 named entity se of Florida.	ubmits this statement for the p c Signature of Registered Ag		ed office or registered agent, or both,  Date
ARASOT ne above the State GNATUI	NST STE 600 A, FL 34237 named entity se of Florida.	c Signature of Registered Ag	ent	
ARASOT ne above the State GNATUI	N ST STE 600  A, FL 34237  e named entity se of Florida.  RE:  Electroni  S AND DIRECT	c Signature of Registered Ag FORS: Delete IAM W III TE 600	ent	Date
e above the State GNATUE FFICER: e: me: dress:	N ST STE 600 TA, FL 34237  In named entity see of Florida.  RE: Electroni  S AND DIRECT  D () MERRILL, WILL 2033 MAIN ST S SARASOTA, FL	c Signature of Registered Agr ORS:  Delete IAM W III TE 600 34237  Delete ERT J ANE	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM W. MERRILL, III D 03/01/2004