2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 19, 2008 8:00 am
Secretary of State
05-28-2008 90012 035 ****61.25

DOCUMENT # N07000003737

1. Entity Name
THE OAKS AT WHISKEY CREEK COMMUNITY ASSOCIATION, INC.

66014418

Principal Place of Business	Mailing Address
11030 N. KENDALL DRIVE SUITE 100 MIAMI, FL 33176	11030 N. KENDALL DRIVE SUITE 100 MIAMI, FL 33176

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
P & M Property Management 14360 So. Tamiami Trail, Unit B Fort Myers, Florida 33912	P & M Property Management 14360 So. Tamiami Trail, Unit B Fort Myers, Florida 33912

04302008 Chg-NP CR2E037 (12/06)

4. FEI Number 74-3239719 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BOLANOS TRUXTON, P.A. 12800 UNIVERSITY DRIVE SUITE 350 FORT MYERS, FL 33907	Name PAUL SAPP Street Address (P.O. Box Number is Not Acceptable) 14360 S. TAMIAMI TR, B City FT. MYERS, FL **FL** Zip Code 33912

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Paul A Sapp
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PALLIN, RAMON 11030 N. KENDALL DRIVE, SUITE 100 MIAMI, FL 33176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VILLAR, GABRIEL 11030 N. KENDALL DRIVE, SUITE 100 MIAMI, FL 33176	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CATHERINE DIBENEDETTI 5965 WINKLER RD FT. MYERS, FL 33908	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VASQUEWZ, JOHANNY 11030 N. KENDALL DRIVE, SUITE 100 MIAMI, FL 33176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Catherine C. DiBenedetti 4/30/08 239-482-6253
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #