## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000011080

Entity Name: WHISPERING DAWN, INC.

FILED Mar 03, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1519 CLOWER DRIVE 3626 GUILDER ST SARASOTA, FL 34231 SARASOTA, FL 34234

Current Mailing Address: New Mailing Address:

1519 CLOWER DRIVE P.O. BOX 2

SARASOTA, FL 34231 SARASOTA, FL 34230

FEI Number: 26-1438823 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KAPICA, DANIEL J

1519 CLOWER DRIVE

SARASOTA, FL 34231 US

KAPICA, DANIEL J

3626 GUILDER ST

SARASOTA, FL 34234 US

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: 03/03/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 KAPICA, DANIEL J
 Name:
 KAPICA, DANIEL J

 Address:
 1519 CLOWER DRIVE
 Address:
 3626 GUILDER ST

 City-St-Zip:
 SARASOTA, FL 34231
 City-St-Zip:
 SARASOTA, FL 34234

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: DUDLEY, KATHRYN I Name: DUDLEY, KATHERINE I

 Name:
 DUDLEY, KATHRYN I
 Name:
 DUDLEY, KATHERINE

 Address:
 1519 CLOWER DRIVE
 Address:
 1519 CLOWER DRIVE

 City-St-Zip:
 SARASOTA, FL 34231
 City-St-Zip:
 SARASOTA, FL 34231

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

 Name:
 WELCH, WENDLE
 Name:
 WELCH, WENDELL

 Address:
 1519 CLOWER DRIVE
 Address:
 1519 CLOWER DRIVE

 City-St-Zip:
 SARASOTA, FL 34231
 City-St-Zip:
 SARASOTA, FL 34231

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: DANIEL J. KAPICA PRES 03/03/2009