

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08376

FILED  
Apr 27, 2006  
Secretary of State

**Entity Name:** WHISPERING LAKES SERVICE ASSOCIATION, INC.

**Current Principal Place of Business:**

2183 N. POWERLINER  
STE 1  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

2183 N. POWERLINER  
STE 1  
POMPANO BEACH, FL 33069

**New Mailing Address:**

**FEI Number:** 59-2441795

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KOZIN, BRADLEY S  
2183 N. POWERLINE RD,  
SUITE 2  
POMPANO BCH., FL 33069 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: KOZIN, BRADLEY S  
Address: 2183 N. POWERLINE RD #1  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VTD ( ) Delete  
Name: MCKINNEY, JOHN T.623,  
Address: 1717 PENN AVENUE  
City-St-Zip: PITTSBURGH, PA 15221

Title: SD ( ) Delete  
Name: ROEPNACK, DAVE  
Address: 3195 N. POWERLANE RD STE 100  
City-St-Zip: POMPANO BEACH, FL 33069

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: SD (X) Change ( ) Addition  
Name: HOLMAN, ED  
Address: 2301 NW 33RD COURT, #112  
City-St-Zip: POMPANO BEACH, FL 33069

I hereby certify that the information supplied with this filing does not qualify for the 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: BRADLEY S. KOZIN

PD

04/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date