2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23009

FILED May 02, 2007 Secretary of State

Entity Name: THE WHISTLER CONDOMINIUM, INC.

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

P O BOX 6727 2952 PARK STREET

P O BOX 67274 **UNIT A**

JACKSONVILLE, FL 32236 US JACKSONVILLE, FL 32205 US

New Mailing Address: Current Mailing Address:

P O BOX 6727 P O BOX 67274

JACKSONVILLE, FL 32236 US

FEI Number: 59-2895041 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

GRAFF, ALLISON STEUART, ROBERT 2952B PARK ST 2952A PARK ST

JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32205 US 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: ROBERT STEUART 05/02/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BEVERLY, PATRICIA BEVERLY, PATRICIA Name: Name: 2954 A PARK ST Address: 2954 A PARK ST Address: City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32205

Title: () Delete Title: TD (X) Change () Addition VELEZ, LOUIS & CAROLE Name: VELEZ, LOUIS Name:

Address: 2954 B. PARK ST. Address: 2954 B. PARK ST. City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32205

Title: PD () Delete Title: PD (X) Change () Addition GRAF, ALISON STEUART, ROBERT Name: Name:

2952 B PARK ST Address: Address: 2952 A PARK ST City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32205

Title: VΡ () Delete Title: SD

(X) Change () Addition Name: STEUART, ROBERT A Name: VELEZ, CAROLE 2954B PARK ST Address: 2952 A PARK ST Address:

City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32205

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: CAROLE VELEZ SD 05/02/2007