2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008
Secretary of State

DOCUMENT# N25135

Entity Name: WHISPERING OAKS HOMEOWNERS ASSOCIATION OF ORMOND BEACH, INC.

Current Principal Place of Business:

14 FERNERY TR
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 11562
DAYTONA BEACH, FL 32120

New Mailing Address:

FEI Number: 59-3015902 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEVENSON, EDWARD
15 FERNERY TRAIL
ORMOND BEACH, FL 32174 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:	PRES	( ) Delete
Name:	STEVENSON, EDWARD	
Address:	15 FERNERY TRAIL	
City-St-Zip:	ORMOND BEACH, FL 32174	
Title:	DIR	( ) Delete
Name:	TETERS, JIM	
Address:	9 FERNERY TR.	
City-St-Zip:	ORMOND BEACH, FL 32174	
Title:	TRES	( ) Delete
Name:	STEMAN, PATRICIA	
Address:	14 FERNERY TRAIL	
City-St-Zip:	ORMOND BEACH, FL 32174	
Title:	SEC	( ) Delete
Name:	BENNETT, LORI	
Address:	5 FERNERY TRAIL	
City-St-Zip:	ORMOND BEACH, FL 32174	
Title:	DIR	( ) Delete
Name:	OUELLETTE, ROBIN	
Address:	16 FERNERY TRAIL	
City-St-Zip:	ORMOND BEACH, FL 32174	
Title:	VP	( ) Delete
Name:	RABBITT, DAVID	
Address:	3 FERNERY TRAIL	
City-St-Zip:	ORMOND BEACH, FL 32174	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	DIR	(X) Change ( ) Addition
Name:	VENEMA, GREG	
Address:	6 FERNERY TR.	
City-St-Zip:	ORMOND BEACH, FL 32174	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	VENEMA, BARB	
Address:	6 FERNERY TRAIL	
City-St-Zip:	ORMOND BEACH, FL 32174	

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: PATRICIA STEMAN TRES 04/16/2008

Electronic Signature of Signing Officer or Director — Date