2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State
03-17-2003 90130 045 ****61.25

DOCUMENT # N28020

1. Entity Name

WHISPER LAKES UNIT 2 HOMEOWNER'S ASSOCIATION, IN C.

Principal Place of Business	Mailing Address
P.O. BOX 770874 ORLANDO FL 32877-0874 US	P.O. BOX 770874 ORLANDO FL 32877-0874 US

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2935894 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

O'NEILL, EMILY
3180 BURLINGTON DR
ORLANDO FL 32837

7. Name and Address of New Registered Agent

Name: Victor M. RAMIREZ
Street Address (P.O. Box Number is Not Acceptable): 11959 ATLIN DR
City: ORLANDO FL Zip Code: 32837

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 _____ 2/24/03
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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	VD CORTES, HECTOR 11878 ATLIN DR ORLANDO FL 32837	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RAMIREZ Victor M. 11959 ATLIN DR ORLANDO FL 32837	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GARCIA, NELSON C 2144 OPILANA ST ORLANDO FL 32837	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD QUIÑONES JUAN D 2136 OPILANA ST ORLANDO FL 32837	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD LAWER, REGIS E 11802 ATLIN DRIVE ORLANDO FL 32837	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD BROWN LEE. A PO BOX 771066 ORLANDO FL 32877	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MARTINO JOSE 11886 ATLIN DR ORLANDO FL 32837	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C RAQUEL GONZALEZ 11920 ATLIN DR ORLANDO FL 32837	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 an officer like empowered.

407 765 4619

SIGNATURE: [illegible] REQUIRED Lee 2/24/03