

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90109 002 ****61.25

DOCUMENT # N29109

1. Corporation Name

WHISPERWOOD MANUFACTURED HOMEOWNERS ASSOCIATION,
INC.

Principal Place of Business

3070 WHISPER BLVD.
DELAND FL 32724

Mailing Address

3027 TUCKAHOE LANE
DELAND FL 32724
US

2 3 4 6 8
234668 - 90109 - 2



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

25

2a. Mailing Address

26 2979 Turtle Dove Trail

27 Suite, Apt. #, etc.

28 City & State

29 DeLand, FL

30 Zip Country

31 32724

3. Date Incorporated or Qualified

11/03/1988

4. FEI Number

59-2930705

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

ROLLO, WALTER
3027 TUCKAHOE
LANE
DELAND FL 32724

10. Name and Address of New Registered Agent

81 Name

Norman E. McCorkle

82 Street Address (P.O. Box Number is Not Acceptable)

2979 Turtle Dove Trail

83

84 City

DeLand

FL

85 Zip Code

32724

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Norman E. McCorkle NORMAN E. MCCORKLE

1-26-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD ~~XX~~ DELETE
NAME NALL, ROBERT
STREET ADDRESS 4136 WINTER WOOD RUN
CITY-ST-ZIP DELAND FL 32724

TITLE PD ~~XX~~ DELETE
NAME ROLLO, WALTER
STREET ADDRESS 3027 TUCKAHOE LANE
CITY-ST-ZIP DELAND FL 32724

TITLE D ~~XX~~ DELETE
NAME TERRY, DON
STREET ADDRESS 3034 TURTLE DOVE TRAIL
CITY-ST-ZIP DELAND FL 32724

TITLE DS ~~XX~~ DELETE
NAME GILOTTI, MARIE
STREET ADDRESS 3016 TREE FROG LANE
CITY-ST-ZIP DELAND FL 32724

TITLE D ☐ DELETE
NAME MORRIS, RUDY
STREET ADDRESS 3063 TURTLE DOVE TRAIL
CITY-ST-ZIP DELAND FL 32724

TITLE D ~~XX~~ DELETE
NAME ABRAMS, JOSEPH
STREET ADDRESS 3106 WHISPER BLVD.
CITY-ST-ZIP DELAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME Norman E. McCorkle
1.3 STREET ADDRESS 2979 Turtle Dove Trail
1.4 CITY-ST-ZIP DeLand, FL 32724

2.1 TITLE VD ☒ Change ☐ Addition
2.2 NAME Fritz Hall
2.3 STREET ADDRESS 3009 Bay Springs Trail
2.4 CITY-ST-ZIP DeLand, FL 32724

3.1 TITLE SD ☒ Change ☐ Addition
3.2 NAME Robert Martin
3.3 STREET ADDRESS 2967 Turtle Dove Trail
3.4 CITY-ST-ZIP DeLand, FL 32724

4.1 TITLE TD ☒ Change ☐ Addition
4.2 NAME Ingolf L. Madson
4.3 STREET ADDRESS 4135 Bald Cypress Drive
4.4 CITY-ST-ZIP DeLand, FL 32724

5.1 TITLE D ☒ Change ☐ Addition
5.2 NAME Linda Casper
5.3 STREET ADDRESS 3133 Bay Springs Trail
5.4 CITY-ST-ZIP DeLand, FL 32724

6.1 TITLE D ☒ Change ☐ Addition
6.2 NAME Jerrold Davis
6.3 STREET ADDRESS 3130 Turtle Dove Trail
6.4 CITY-ST-ZIP DeLand, FL 32724

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Norman E. McCorkle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
NORMAN E. MCCORKLE

1-26-98

Date

904-740-9860

Daytime Phone #

CR2E037 (11/98)

257000 70101-2
N 29109

Addition to Document # N29109

Whisperwood Manufactured Homeowners Association

Officers and Directors

D

**Frances Deeb-Loffman
3138 Deer Trail
Deland, Fl. 32724**

Addition

D

**Al Ford
3122 Turtle Dove Trail
Deland, Fl. 32724**

Addition

D

**Anna Gilbert
3059 Whisper Blvd
Deland, Fl. 32724**

Addition

D

**George Hempfling
3144 Hickory Tree Lane
Deland, Fl. 32724**

Addition