

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31418

FILED  
Jul 23, 2008  
Secretary of State

Entity Name: WHISPERING WINDS, INC.

**Current Principal Place of Business:**

1080 WINDY WAY  
APOPKA, FL 32703

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1564  
APOPKA, FL 32704 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

MCCULLOH, NEAL ESQ  
CLAYTON AND MCCULLOH  
106 N MAITLAND CTR COMMONS BLVD  
MAITLAND, FL 32757 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RITTENHOUSE, MIKE  
Address: 1080 WINDY WAY  
City-St-Zip: APOPKA, FL 32703

Title: BMT ( ) Delete  
Name: RYES, DENNIS  
Address: 1090 WINDY WAY  
City-St-Zip: APOPKA, FL 32703

Title: BMT ( ) Delete  
Name: MULLIS, TANYA  
Address: 1172 WINDY WAY  
City-St-Zip: APOPKA, FL 32703

Title: BMT ( ) Delete  
Name: KURTZ, WENDY  
Address: 1209 WINDWARD DR  
City-St-Zip: APOPKA, FL 32703

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

Title: P (X) Change ( ) Addition  
Name: TILLET, LUIS  
Address: 1081 WINDY WAY  
City-St-Zip: APOPKA, FL 32703

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

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

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

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: LUIS H. TILLET

PRES

07/23/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date