2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003305

FILED Jan 30, 2012 Secretary of State

Entity Name: WHISPERING PINES MOBILE HOME COURT HOMEOWNER'S ASSOCIATION, INC.

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

616 SUNSET CIRCLE

FROSTPROOF, FL 33843 US

Current Mailing Address: New Mailing Address:

616 SUNSET CIRCLE

FROSTPROOF, FL 33843 US

FEI Number: 59-2659257 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

COLLINS, LEE J 529 VERSAILLES DR SUITE 103 MAITLAND, FL 32751 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:

LAMBERT, LAWRENCE L SR Name: Address: 616 SUNSET CIRCLE City-St-Zip: FROSTPROOF, FL 33843

Title:

Name: TRAXLER, IVA Address: 325 PLEASANT PLACE City-St-Zip: FROSTPROOF, FL 33843

Title:

MILLER, MARY L Name: Address: 646 SUNSET CIRCLE City-St-Zip: FROSTPROOF, FL 33843

Title: VΡ

Name: CREECH, CHARLES M Address: 615 SUNSET CIRCLE

City-St-Zip: FROSTPROOF, FL 33843

Title:

DANNA, DOMENIC Name: 611 SUNSET CIRCLE Address: FROSTPROOF, FL 33843 City-St-Zip:

Title:

SIEWART, VIRGINIA Name: Address: 613 SUNSET CIRCLE FROSTPROOF, FL 33843 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: LAWRENCE L LAMBERT SR **PRES** 01/30/2012