

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005177

FILED  
Feb 20, 2006  
Secretary of State

**Entity Name:** WHISPERING PINES OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

293 MAGNOLIA BAY DR  
EASTPOINT, FL 32328

**New Principal Place of Business:**

362 GULF BREEZE PKWY  
SUITE 115  
GULF BREEZE, FL 32561

**Current Mailing Address:**

362 GULF BREEZE PKWY  
#115  
GULF BREEZE, FL 32561

**New Mailing Address:**

FEI Number: 59-3367700      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GREEN, EMILY M  
362 GULF BREEZE PKWY #115  
GULF BREEZE, FL 32561      US

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

GREEN, EMILY M  
6561 SCENIC HWY  
PENSACOLA, FL 32504      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: \_\_\_\_\_

02/20/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GREEN, DONALD R  
Address: P.O. BOX 975  
City-St-Zip: EASTPOINT, FL 32328

Title: D ( ) Delete  
Name: GREEN, EMILY M  
Address: P.O. BOX 975  
City-St-Zip: EASTPOINT, FL 32328

Title: D (X) Delete  
Name: LANE, LARRY  
Address: 135 HWY 98  
City-St-Zip: EASTPOINT, FL 32328

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

Title: PD (X) Change ( ) Addition  
Name: GREEN, EMILY M  
Address: 362 GULF BREEZE PKWY #115  
City-St-Zip: GULF BREEZE, FL 32561

Title: D (X) Change ( ) Addition  
Name: GREEN, EMILY M  
Address: 362 GULF BREEZE PKWY #115  
City-St-Zip: GULF BREEZE, FL 32561

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

I hereby certify that the information supplied with this filing does not qualify for the 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: EMILY M. GREEN

PRES

02/20/2006

Electronic Signature of Signing Officer or Director

Date