

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

APPROVED
AND
FILED

03 JUL -1 PM 2:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N96000001472**

1. Entity Name

WHISPERING PINES RESIDENTS
ASSOCIATION, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
One Progress Plaza

3. Mailing Address
P.O. Box 1689

Suite, Apt. #, etc.
Suite 1210

Suite, Apt. #, etc.

City & State
St. Petersburg, Florida

City & State
St. Petersburg, Florida

4. FEI Number
5977323

Applied For
Not Applicable

Zip
33701

Country
USA

Zip
33731

Country
USA

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

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Karen Maller, Esq.

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

One Progress Plaza, Suite 1210

City St. Petersburg

FL

Zip Code
33701

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

Karen E. Maller

Karen E. Maller, Esq.

6/19/03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25
Initial or Amended UBR

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
Roberta Francek
7501 142nd Ave. #553
Largo, FL 33771

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000021011110
06/19/03--01030--014 **61.25

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VP
Albert Kessler
7501 142nd Ave. #577
Largo, FL 33771

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000021011110
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
Fred Jasper
7501 142nd Ave. #673
Largo, FL 33771

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S
Polly Moore
7501 142nd Ave. #594
Largo, FL 33771

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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 on an attachment with an address, with all other like empowered.

SIGNATURE

Polly Moore

Polly Moore Secretary

6-9-03

798-5224

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037B (12/02)