

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005448

FILED
Jan 26, 2007
Secretary of State

Entity Name: WHISPERING WINDS CHARTER SCHOOL PROJECT, INC.

Current Principal Place of Business:

12390 NW OLD FANNIN RD
CHIEFLAND, FL 32644

New Principal Place of Business:

12390 NW OLD FANNIN RD.
CHIEFLAND, FL 32626

Current Mailing Address:

12390 NW OLD FANNIN RD
CHIEFLAND, FL 32626

New Mailing Address:

12390 NW OLD FANNIN RD.
CHIEFLAND, FL 32626

FEI Number: 59-3572902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNELL, JOY S
1180 SE 768TH STREET
OLD TOWN, FL 32680 US

Name and Address of New Registered Agent:

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: T (X) Delete
Name: FARROW, GEORGE
Address: 14350 NW 75TH AVE.
City-St-Zip: TRENTON, FL 32693

Title: D () Delete
Name: BELL, MELISSA
Address: 7270 NW 95TH STREET
City-St-Zip: CHIEFLAND, FL 32626

Title: S () Delete
Name: JORDAN, ANGELA
Address: P. O. BOX 316
City-St-Zip: CHIEFLAND, FL 32644

Title: V () Delete
Name: MARTIN, KIM
Address: 7699 SW COUNTRY RD, 334-A
City-St-Zip: TRENTON, FL 32693

Title: P () Delete
Name: ARRINGTON, RITA
Address: 2450 NW 160TH ST.
City-St-Zip: TRENTON, FL 32693

Title: D () Delete
Name: JOHNSON, DARLENE
Address: 12391 NW 90 TH AVE
City-St-Zip: CHIEFLAND, FL 32626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: CARLSON, PAUL
Address: 8450 NW 141ST STREET
City-St-Zip: TRENTON, FL 32693

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

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 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: J. SUZANN CORNELL

D

01/26/2007

Electronic Signature of Signing Officer or Director

Date