2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

DOCUMENT# N98000005448

Entity Name: WHISPERING WINDS CHARTER SCHOOL PROJECT, INC.

Current Principal Place of Business:

2480 NW OLD FANNIN RD.
CHIEFLAND, FL 32626

New Principal Place of Business:

Current Mailing Address:

2480 NW OLD FANNIN RD.
CHIEFLAND, FL 32626

New Mailing Address:

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: D
Name: CARLSON, PAUL
Address: 8450 NW 141ST STREET
City-St-Zip: TRENTON, FL 32693

Title: S
Name: JORDAN, ANGELA
Address: 5250 NW 37TH PLACE
City-St-Zip: CHIEFLAND, FL 32626

Title: D
Name: LOCKE, BARBARA
Address: 5251 NW 137TH LANE
City-St-Zip: CHIEFLAND, FL 32626

Title: D
Name: BUTLER, NICOLE
Address: 13050 NW 85TH AVE
City-St-Zip: CHIEFLAND, FL 32626

Title: D
Name: SCHWINGEL, TERESA
Address: 9350 NW 131ST PLACE
City-St-Zip: CHIEFLAND, FL 32626

Title: D
Name: ROSS, RUTHANN
Address: 15651 NW 2ND STREET
City-St-Zip: TRENTON, FL 32693

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: ANGELA JORDAN S 01/05/2011

Electronic Signature of Signing Officer or Director — Date