

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90350 042 ***150.00

DOCUMENT # P94000076261

1. Entity Name

Whispering Lakes Inc. ✓

Principal Place of Business

Mailing Address

4840 Mile Stretch Rd
 Holiday FL 34690

same

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3284687

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent:

Angeline Chaconas
 664 Whispering Lakes Blvd
 Tarpon Springs FL
 34689

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
AFTER MAY 1, 2001 Fee will be \$550.00
Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME Chaconas, Angeline
STREET ADDRESS
CITY-ST-ZIP

TITLE TV ☐ Delete
NAME Madalvanos Georgia
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE address change ☒ Change ☐ Addition
NAME 664 Whispering Lakes Blvd
STREET ADDRESS
CITY-ST-ZIP Tarpon Springs FL 34689

TITLE address change ☒ Change ☐ Addition
NAME 4840 Mile Stretch Dr.
STREET ADDRESS
CITY-ST-ZIP Holiday FL 34690

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 807, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

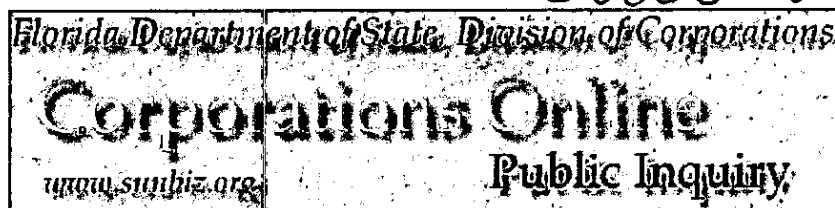
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Angeline Chaconas

4/30/01 942727 8864

CR2E034 (11/00)

Attachment

#P94000076261
D0055758

Florida Profit

WHISPERING LAKES, INC.

PRINCIPAL ADDRESS

4840 MILE STRETCH RD.

HOLIDAY FL 34690

Changed 09/21/1999

MAILING ADDRESS

4840 MILE STRETCH RD.

HOLIDAY FL 34690

Changed 09/21/1999

Document Number
P94000076261FEI Number
593284687Date Filed
10/14/1994State
FLStatus
ACTIVEEffective Date
NONELast Event
REINSTATEMENTEvent Date Filed
01/07/1999Event Effective Date
NONE

Registered Agent

Name & Address
CHACONAS, ANGELINE 664 WHISPERING LAKES BLVD TARPON SPRINGS FL 34689
Name Changed: 01/07/1999
Address Changed: 05/15/2000

Officer/Director Detail

Name & Address	Title
CHACONAS, ANGELINE 3827 LOUIS CIR. TARPON SPRINGS FL 34689	PS
MADALVANOS, GEORGIA 4620 AEGEAN AVE. HOLIDAY FL 34690	TV

Attachment
#P94000076261
D0055758

Annual Reports

Report Year	Filed Date	Intangible Tax
1998	01/07/1999	Y
1999	09/21/1999	N
2000	05/15/2000	

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