

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728211

Entity Name: WHISKEY CREEK CIVIC ASSOCIATION, CORP.**Current Principal Place of Business:**1449 WHISKEY CREEK DRIVE
FORT MYERS, FL 33919**Current Mailing Address:**1449 WHISKEY CREEK DRIVE
FORT MYERS, FL 33919 US**FEI Number:** 59-2389395**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LAMACH, BERNARD D
1449 WHISKEY CREEK DRIVE
FORT MYERS, FL 33919 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GOODERHAM, KATHRYN
Address 1449 WHISKEY CREEK DRIVE
City-State-Zip: FORT MYERS FL 33919

Title TREASURER
Name TICE, KAREN
Address 1449 WHISKEY CREEK DRIVE
City-State-Zip: FORT MYERS FL 33919

Title DIRECTOR
Name LAMACH, BERNARD
Address 1449 WHISKEY CREEK DRIVE
City-State-Zip: FORT MYERS FL 33919

Title DIRECTOR
Name FRAZER, RONALD
Address 1449 WHISKEY CREEK DRIVE
City-State-Zip: FORT MYERS FL 33919

Title VP
Name RODGERS, DENNIS B
Address 1449 WHISKEY CREEK DRIVE
City-State-Zip: FORT MYERS FL 33919

Title SECRETARY
Name MCCAFFERTY, JEANNE
Address 1449 WHISKEY CREEK DRIVE
City-State-Zip: FORT MYERS FL 33919

Title DIRECTOR
Name MATTER, PAUL
Address 1449 WHISKEY CREEK DRIVE
City-State-Zip: FORT MYERS FL 33919

Title DIRECTOR
Name CHASSE, LEE
Address 1449 WHISKEY CREEK DRIVE
City-State-Zip: FORT MYERS FL 33919

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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: KAREN TICE**TREASURER****02/15/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MCCABE, JAMES
Address	1449 WHISKEY CREEK DRIVE
City-State-Zip:	FORT MYERS FL 33919