| Current Prin 323 CIRCLE DI MAITLAND, FL | | | 41432 | 8679700 |
|--|---|--------------------------|--|------------------------|
| Current Mai | iling Address: | | | |
| 323 CIRCLE MAITLAND, | DR FL 32751 US | | | |
| FEI Number: 59-2764647 | | | Certificate of Status Desired: No | |
| Name and A | Address of Current Registered Agent: | | | |
| VISTA COMML 323 CIRCLE DI | UNITY ASSOCIATION MANAGEMENT R | | | |
| MAITLAND, FL | . 32751 US | | | |
| MAITLAND, FL | . 32751 US d entity submits this statement for the purpose of changing its regi | stered office or regis | tered agent, or both, in the State of | Florida. |
| MAITLAND, FL | | stered office or regis | tered agent, or both, in the State of | Florida. 04/25/2022 |
| MAITLAND, FL | d entity submits this statement for the purpose of changing its regi | stered office or regis | tered agent, or both, in the State of | |
| MAITLAND, FL | d entity submits this statement for the purpose of changing its regis E: TINA YAMADA Electronic Signature of Registered Agent | stered office or regis | tered agent, or both, in the State of | 04/25/2022 |
| MAITLAND, FL The above name SIGNATURE | d entity submits this statement for the purpose of changing its regis E: TINA YAMADA Electronic Signature of Registered Agent | stered office or regis | tered agent, or both, in the State of | 04/25/2022 |
| MAITLAND, FL The above name SIGNATURE Officer/Dire | d entity submits this statement for the purpose of changing its regises: TINA YAMADA Electronic Signature of Registered Agent Agent : | | | 04/25/2022 |
| MAITLAND, FL The above name SIGNATURE Officer/Dire Title | d entity submits this statement for the purpose of changing its regis TINA YAMADA Electronic Signature of Registered Agent Ctor Detail : PRESIDENT | Title | DIRECTOR | 04/25/2022 |
| MAITLAND, FL The above name SIGNATURE Officer/Dire Title Name | d entity submits this statement for the purpose of changing its regis E: TINA YAMADA Electronic Signature of Registered Agent Ctor Detail : PRESIDENT SEAMANS, JANICE 323 CIRCLE DR | Title Name | DIRECTOR PALACIO, ANDRES 323 CIRCLE DR | 04/25/2022 |
| MAITLAND, FL The above name SIGNATURE Officer/Dire Title Name Address | d entity submits this statement for the purpose of changing its regis E: TINA YAMADA Electronic Signature of Registered Agent Ctor Detail : PRESIDENT SEAMANS, JANICE 323 CIRCLE DR | Title Name Address | DIRECTOR PALACIO, ANDRES 323 CIRCLE DR | 04/25/2022 |
| MAITLAND, FL The above name SIGNATURE Officer/Dire Title Name Address City-State-Zip: | d entity submits this statement for the purpose of changing its regis E: TINA YAMADA Electronic Signature of Registered Agent ctor Detail : PRESIDENT SEAMANS, JANICE 323 CIRCLE DR MAITLAND FL 32751 | Title Name Address | DIRECTOR PALACIO, ANDRES 323 CIRCLE DR | 04/25/2022 |

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: WHISPER LAKES UNIT 5 HOMEOWNER'S ASSOCIATION, INC.

City-State-Zip: MAITLAND FL 32751

DOCUMENT# N10157

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: JANICE SEAMANS

PRESIDENT

04/25/2022

FILED Apr 25, 2022

Secretary of State

4143286797CC

Electronic Signature of Signing Officer/Director Detail