

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22734

Entity Name: WHISPER WOODS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3629 WHISPERWOOD CIR
MELBOURNE, FL 32901

Current Mailing Address:

3629 WHISPERWOOD CIR
MELBOURNE, FL 32901 US

FEI Number: 59-2997602

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORSE, BARBARA
3635 WHISPERWOOD CIRCLE
MELBOURNE, FL 32901 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 T
Name MORSE, BARBARA
Address 3635 WHISPERWOOD CIRCLE
City-State-Zip: MELBOURNE FL 32901

Title PRESIDENT
Name CORLETTE, RAY
Address 3613 WHISPERWOOD CIRCLE
City-State-Zip: MELBOURNE FL 32901

Title SECRETARY
Name RYALL, JOE
Address 3658 WHISPERWOOD CIRCLE
City-State-Zip: MELBOURNE FL 32901

Title D
Name DORSEY, JOYCE
Address 3601 WHISPERWOOD CIRCLE
City-State-Zip: MELBOURNE FL 32901

Title VP
Name SMITH, LORRAINE
Address 913 WHISPER OAK DRIVE
City-State-Zip: MELBOURNE FL 32901

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: BARBARA MORSE

TREASURER

01/15/2016

Electronic Signature of Signing Officer/Director Detail

Date