

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Dec 01, 2008  
Secretary of State**

DOCUMENT# N03000003875

**Entity Name:** WHISPER CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**811 EUCLID AVE., UNIT NO. 1  
MIAMI BEACH, FL 33139**New Principal Place of Business:**811 EUCLID AVENUE  
MIAMI BEACH, FL 33139**Current Mailing Address:**PO BOX 415342  
MIAMI BEACH, FL 33141 US**New Mailing Address:**PO BOX 402507  
MIAMI BEACH, FL 33140 US

FEI Number: 20-1174864

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**THE WALL MANAGEMENT CORP  
1440 J F KENNEDY CAUSEWAY  
429-C  
NORTH BAY VILLAGE, FL 33141 US**Name and Address of New Registered Agent:**COMPLETE PROPERTY MANAGEMENT  
3550 BISCAYNE BLVD.  
SUITE 401  
MIAMI, FL 33137 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: RAY HICKS

12/01/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: D ( ) Delete  
Name: EXELBERT, BRIAN  
Address: 811 EUCLID AVE., UNIT NO. 1  
City-St-Zip: MIAMI BEACH, FL 33139Title: D ( ) Delete  
Name: CUNNINGHAM, KEVIN  
Address: 811 EUCLID AVE., UNIT NO. 7  
City-St-Zip: MIAMI BEACH, FL 33139Title: D ( ) Delete  
Name: DIMOLITSAS, SPIRO  
Address: 811 EUCLID AVENUE # 14  
City-St-Zip: MIAMI BEACH, FL 33139**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRIAN EXELBERT

D

12/01/2008

Electronic Signature of Signing Officer or Director

Date