A0000000371

CT CORPORATION

CORPORATION(S) NAME

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Whispering Oaks Housing P	Partners I td	- 14	THE	
	attiets, Ltd.		- <u>P</u> 72	
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() Nonprofit	()	() Merger		
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	() Reinstatement	()		
() Limited Partnership	() Annual Report	() Other	0	-
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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership organized under the laws of the state of Florida __, submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. WHISPERING OAKS HOUSING PARTNERS, LTD.

	Name of the limited partnership		FAL	2002 .	
2. 03/01/2000	3, A0000000371				
Date of fili	ing/registration in Florida	Document number assi	gnet D	2 _	
4. The name and	address of the present registered agent and office:		RY OF SEE. F	FILED	
	Becky T. Edwards				
	100 Breckstrom Drive		RIDA	С Т	
	Oviedo, FL 32765		-		
5. The name and	d street address of the successor registered agent and o	ffice: (P.O. Box no	t acceptabl	e)	
	C T Corporation System				,
	c/o C T Corporation System, 1200 South Pine Island R.	oad			-
	Plantation, Florida 33324				
Whispering, C	s authorized by the general partners. Jaks Housing Associates, L.L.C., a Flor:	ida limited lia	bility c	ompany, gen	eral
By: LNR Why S	pering Oaks Limited, Inc., a Florida corp a managing mer	mber 1/14	2/02	par	tner
	Signature of General Partner V Rubin, Vice President amea as registered agent and to accept service of		Date	Thursday J	
narthership at th	he place designated in this certificate. I hereby accep	of the appointment a	is registere	ea agent	
and sorree to act	t in this capacity. I further agree to comply with the pupelete performance of my duties, and I am familiar	provisions of all stat	utes relativ	ve to the	
position as regis	prese performance of my dattes, and I am fumiliar stered agent.		, conguno		
	PETER F. SOUZA	, luci	ก		
	ASSISTANT STORTARY	1/16/	δV		

Registered Agent signature

Date

Peter F. Souza, Assistant Secretary

Filing Fee: \$35.00

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHSE004(3/95)

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