

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000011756

**FILED**  
**Apr 12, 2007**  
**Secretary of State**

**Entity Name:** WHISPER ZONE, LLC

**Current Principal Place of Business:**

1580 SAWGRASS CORPORATE PARKWAY  
SUITE 130  
SUNRISE, FL 33323

**New Principal Place of Business:**

**Current Mailing Address:**

1580 SAWGRASS CORPORATE PARKWAY  
SUITE 130  
SUNRISE, FL 33323

**New Mailing Address:**

**FEI Number:** 41-2090706

**FEI Number Applied For** ( )

**FEI Number Not Applicable** ( )

**Certificate of Status Desired** ( )

**Name and Address of Current Registered Agent:**

DENNISON & DENNISON, P.A.  
1580 SAWGRASS CORPORATE PARKWAY  
SUITE 130  
SUNRISE, FL 33323 US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** DENNISON, JOHN MGRM  
**Address:** 1580 SAWGRASS CORPORATE PKWY #130  
**City-St-Zip:** SUNRISE, FL 33323 US

**ADDITIONS/CHANGES:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN DENNISON, MANAGING MEMBER

MGMR

04/12/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date