## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000009490

Entity Name: WHISPERING OAKS LLC

**FILED** Feb 02, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

6787 SE 125TH ST #63 BELLEVIEW, FL 34420 US

**Current Mailing Address: New Mailing Address:** 

6787 SE 125TH ST #63 BELLEVIEW, FL 34420 US

FEI Number: 20-2264581 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KOSTA, TOM 6787 SE 125TH ST #63 KOSTA, TOM

13643 FOX GLOVE STREET BELLEVIEW, FL 34420 US WINTER GARDEN, FL 34787 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: 02/02/2007

> Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Delete (X) Change ( ) Addition KOSTA, TOM KOSTA, TOM Name: Name:

Address: 6787 SE 125TH ST #63 Address: 13643 FOX GLOVE STREET City-St-Zip: BELLEVIEW, FL 34420 US City-St-Zip: WINTER GARDEN, FL 34787 US

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition

Name: KOSTA, TERESA Name: KOSTA, TERESA

Address: 6787 SE 125TH ST #63 Address: 13643 FOX GLOVE STREET City-St-Zip: BELLEVIEW, FL 34420 US City-St-Zip: WINTER GARDEN, FL 34787 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: TERESA KOSTA **MGRM** 02/02/2007