


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000010428 1. Entity Name WHISPERING WOODS CENTER L.L.C.	
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Principal Place of Business 16311 N.W. 52ND AVENUE MIAMI, FL 33014 US	Mailing Address 16311 N.W. 52ND AVENUE MIAMI, FL 33014 US
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DO NOT WRITE IN THIS SPACE



03152007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 04-3807047	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**DORNBUSCH, HARRY
16311 N.W. 52ND AVENUE
MIAMI, FL 33014**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-appointing) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

U000000687623
04/10/07-80046-017 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DORNBUSCH, HARRY 16311 N.W. 52ND AVENUE MIAMI, FL 33014
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DORNBUSCH, JAIME 16311 N.W. 52ND AVENUE MIAMI, FL 33014
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: HARRY DORNBUSCH 3/19/07 (305) 621-0132
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #