

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 18, 2008 8:00 am
Secretary of State

07-18-2008 90050 033 ***138.75

DOCUMENT # L05000010428

1. Entity Name
WHISPERING WOODS CENTER L.L.C.



Principal Place of Business
16311 N.W. 52ND AVENUE
MIAMI, FL 33014 US

Mailing Address
16311 N.W. 52ND AVENUE
MIAMI, FL 33014 US

50008518



2. Principal Place of Business - No P.O. Box #
1150 E. Hallandale Beach Blvd

3. Mailing Address
1150 E. Hallandale Beach Blvd

Suite, Apt. #, etc.
Suite B

Suite, Apt. #, etc.
Suite B

07152008 Chg-LLC CR2E083 (12/06)

City & State
Hallandale Beach, FL

City & State
Hallandale Beach, FL

4. FEI Number
04-3807047

Applied For
Not Applicable

Zip
33009

Country
USA

Zip
33009

Country
USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

*1150 E. Hallandale Beach Blvd.
Suite B
Hallandale Beach, FL
33009*

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

7/15/08

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete
NAME DORNBUSCH, HARRY
STREET ADDRESS 16311 N.W. 52ND AVENUE
CITY-ST-ZIP MIAMI, FL 33014

TITLE ☒ Change ☐ Addition
NAME *1150 E. Hallandale Beach Blvd. Suite B*
STREET ADDRESS *Hallandale Beach, FL 33009*
CITY-ST-ZIP

TITLE MGR ☐ Delete
NAME DORNBUSCH, JAIME
STREET ADDRESS 16311 N.W. 52ND AVENUE
CITY-ST-ZIP MIAMI, FL 33014

TITLE ☒ Change ☐ Addition
NAME *1150 E. Hallandale Beach Blvd. Suite B*
STREET ADDRESS *Hallandale Beach, FL 33009*
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

7/15/08 954-456-8210