

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000021344

FILED  
Apr 30, 2006  
Secretary of State

Entity Name: THE RESIDENCES AT WHISPERING PINES, LLC

**Current Principal Place of Business:**

1701 W. 37TH STREET #17  
HIALEAH, FL 33012

**New Principal Place of Business:**

3400 CORAL WAY  
600  
MIAMI, FL 331453070

**Current Mailing Address:**

1701 W. 37TH STREET #17  
HIALEAH, FL 33012

**New Mailing Address:**

3400 CORAL WAY  
600  
MIAMI, FL 331453070

FEI Number: 20-2428524

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

PUIG, JUAN E  
1701 W. 37TH STREET #17  
HIALEAH, FL 33012 US

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

PUIG, JUAN E  
3400 CORAL WAY  
600  
MIAMI, FL 331453070 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: J PUIG

04/30/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: PUIG, JUAN  
Address: 3400 CORAL WAY  
City-St-Zip: MIAMI, FL 331453070

Title: MGR ( ) Change (X) Addition  
Name: ORDONEZ, JOSE  
Address: 3400 CORAL WAY, SUITE 600  
City-St-Zip: MIAMI, FL 331453070

Title: MGR ( ) Change (X) Addition  
Name: HUBBARD, MICHAEL  
Address: 3400 CORAL WAY # 600  
City-St-Zip: MIAMI, FL 331453070

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: J PUIG

MGRM

04/30/2006

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