## N21868

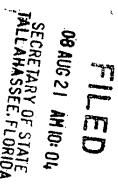
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## **COVER LETTER**

Division of Corporations
SUBJECT: WHISPER WALK Section C., ASSOC. Inc. (Name of Corporation)
DOCUMENT NUMBER: NZ1868
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Marion Malikin President (Name of Contact Person)
Whisper Wall Section C assoc, In
(Firm/Company)
8050 Springtree Roal
(Address)
Boca
(City/State and Zip Code)
For further information concerning this matter, please call:
Marion Fralitin at (561) 451-2871  (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

**Amendment Section** 

Mailing Address: Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



Bank of America Center 625 N. Flagler Drive, 7th Floor West Palm Beach, Florida 33401 Phone: (561) 655-5444 Fax: (561) 832-8987 US Toll Free: (800) 462-7783

ADMINISTRATIVE OFFICE 3111 STIRLING ROAD

FORT LAUDERDALE, FL 33312 800.432.7712 U.S. TOLL FREE August 18, 2008

Reply To: West Palm Beach Kenneth S. Direktor, Esq. Direct dial: (561) 820-2880 KDirektor@becker-poliakoff.com

WWW.BECKER-POLIAKOFF.COM BP@BECKER-POLIAKOFF.COM

Corporate Records Bureau **Division of Corporations** Department of State P.O. Box 6327 Tallahassee, FL 32314

RE: Whisper Walk Section C Association, Inc.; Statement of Change of Registered Office or Registered Agent Or Both For Corporations

FLORIDA OFFICES

BOCA RATON

FORT MYERS

FORT WALTON BEACH HOLLYWOOD

HOMESTEAD

MELBOURNE \*

MIAM

NAPLES

ORLANDO

PORT ST. LUCIE SARASOTA

TALLAHASSEE

TAMPA BAY

WEST PALM BEACH

Dear Sir/Madam:

Enclosed please find an executed Statement of Change of Registered Office or Registered Agent form for the above-referenced Association, as well as a check in the amount of \$35.00 to cover the filing fee cost.

If you have any questions or require anything further, please do not hesitate to contact me. Thank you in advance for your prompt attention to this matter.

Very truly yours,

KENNETH S. DIREKTOR

For the Firm

KSD/ebd **Enclosures** 

U.S. & GLOBAL OFFICES

BEIJING \*

NEW YORK CITY

PARIS \*

PRAGUE

TEL AVIV \*

\* by appointment only

Whisper Walk Section C Association, Inc. cc:

WPB\_DB: 353273\_1

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of 1 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Uhespew Wall Sect. C. assoc. Suc
ί //
2. The principal office address: 8050 Springtree Koad Boca Rator Florida 33496
3. The mailing address (if different):
4. Date of incorporation/qualification: 6/19/2003 Document number: N21868
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Seavest Services Suc
2400 Centre Park West Druce Suice 175
West Palm Beach, 7l 33409
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  MR Kenneth Direktor  Becker & Poliakoff  625 N. 7LAGIER Drive  (Po. Box NOT scoeptable)  West Palm Beach FL. 33401
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Marion Malikin President  (Signature of an officer or director)  MARION MALIKIN President  (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.  (Signsture of Registered Agent)  (Date)
If signing on behalf of an entity:
(Typod or Printed Name)  * * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSER, FL 32314