

2001 UNIFORM BUSINESS REPORT (UBR)

0000058 AF

DOCUMENT # **A98000001597**

1. Entity Name

WRMC I INVESTORS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 FEB 16 PM 1:15

Principal Place of Business

**222 LAKEVIEW AVE., 17TH FLOOR
WEST PALM BEACH FL 33401**

Mailing Address

**222 LAKEVIEW AVE., 17TH FLOOR
WEST PALM BEACH FL 33401**

2. Principal Place of Business

**Gardens Corporate Center
3801 PGA Boulevard, Suite 555
Palm Beach Gardens, FL 33410**

Mailing Address

**Gardens Corporate Center
3801 PGA Boulevard, Suite 555
Palm Beach Gardens, FL 33410**

DO NOT WRITE IN THIS SPACE

NJH

4. FEI Number

65-0852314

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**REGSERV CORP.
222 LAKEVIEW AVE., 17TH FLOOR
WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent

**REGSERV CORP.
Gardens Corporate Center
3801 PGA Boulevard, Suite 555
Palm Beach Gardens, FL 33410**

FL Zip Code

8. By: *Lawrence B. Juran*

By: **Lawrence B. Juran, Vice President**

registered office or registered agent, or both, in the State of Florida.

E: Registered Agent signature required when reinstating

DATE

9. Capital Contributions
as Shown on record.

\$1,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P98000058040**
NAME **WRMC I MEDICAL EQUITY INVESTORS, LTD.**
STREET ADDRESS **222 LAKEVIEW AVE., 17TH FLOOR**
CITY-ST-ZIP **WEST PALM BEACH FL 33401**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS **Gardens Corporate Center**
CITY-ST-ZIP **3801 PGA Boulevard, Suite 555
Palm Beach Gardens, FL 33410**

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02/21/01 01077 016
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE REQUIRED Patrick J. DiSalvo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Vice President

1/30/01 (561)630-5055

Date

Daytime Phone #

CR2E003 (11/00)