

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M98000001046

1. Entity Name
WHITEHALL PROPERTIES LIMITED LIABILITY COMPANY

FILED

00 JAN 18 PM 4:21

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business
% JEROME H. KATZ, V.P.
3 NEW YORK PLAZA
NEW YORK NY 10004

Mailing Address
% JEROME H. KATZ, V.P.
3 NEW YORK PLAZA
NEW YORK NY 10004-2442



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 13-3862839		Applied For <input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
BARTLETT, BARON L ESQUIRE % BARTLET & HECKIN 50 HIGHWAY A1A, SUITE 103 PONTE VEDRA BEACH FL 32082				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City		FL	

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS				10. ADDITIONS/CHANGES			
TITLE NAME	MGR PAN AM EQUITIES, INC.	<input type="checkbox"/> Delete		TITLE NAME	500003115215-5	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
STREET ADDRESS	3 NEW YORK PLAZA			STREET ADDRESS	-01/28/00--01092--022		
CITY-ST-ZIP	NEW YORK NY 10004			CITY-ST-ZIP	*****50.00 *****50.00		
TITLE NAME	MGRM THE FM GRAND CHILDREN'S TRUST	<input type="checkbox"/> Delete		TITLE NAME		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
STREET ADDRESS	3 NEW YORK PLAZA			STREET ADDRESS			
CITY-ST-ZIP	NEW YORK NY 10004			CITY-ST-ZIP			
TITLE NAME	MGRM PAMELA EQUITIES INC.	<input type="checkbox"/> Delete		TITLE NAME		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
STREET ADDRESS	3 NEW YORK PLAZA			STREET ADDRESS			
CITY-ST-ZIP	NEW YORK NY 10004			CITY-ST-ZIP			
TITLE NAME		<input type="checkbox"/> Delete		TITLE NAME		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE NAME		<input type="checkbox"/> Delete		TITLE NAME		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

11. 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 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.

Pan Am Equities by Jerome H. Katz CFO
SIGNATURE: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER
 Date **1/13/00** Daytime Phone # _____