

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000051418

FILED  
Apr 29, 2003  
Secretary of State

Entity Name: WRH INCOME PROPERTIES INC

## Current Principal Place of Business:

100 SECOND AVE. SOUTH  
SUITE 904  
ST. PETERSBURG, FL 33701

## New Principal Place of Business:

## Current Mailing Address:

100 SECOND AVE. SOUTH, SUITE 800  
ST. PETERSBURG, FL 33701

## New Mailing Address:

FEI Number: 59-3649418

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BERTOLINO, BONNIE G  
100 SECOND AVE. SOUTH, SUITE 800  
ST. PETERSBURG, FL 33701 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HOUGH, WILLIAM R  
Address: 100 SECOND AVE. SOUTH, SUITE 800  
City-St-Zip: ST. PETERSBURG, FL 33701

Title: DVP ( ) Delete  
Name: HOUGH, W. ROBB  
Address: 100 SECOND AVE. SOUTH, SUITE 800  
City-St-Zip: ST. PETERSBURG, FL 33701

Title: DVP ( ) Delete  
Name: FEINBERG, HELEN H  
Address: 100 SECOND AVE. SOUTH, SUITE 800  
City-St-Zip: ST. PETERSBURG, FL 33701

Title: DTAS ( ) Delete  
Name: WAECHTER, JOHN W  
Address: 100 SECOND AVE. SOUTH, SUITE 800  
City-St-Zip: ST. PETERSBURG, FL 33701

Title: P ( ) Delete  
Name: RUTLEGE, MARK J  
Address: 100 2ND AVE 5 SUITE 904  
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: EVP ( ) Delete  
Name: SALZER, BRAD S  
Address: 100 2ND AVE SO SUITE 904  
City-St-Zip: SAINT PETERSBURG, FL 33701

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES G. MILLER

VP

04/29/2003

Electronic Signature of Signing Officer or Director

Date