

# 2002 UNIFORM BUSINESS REPORT (UBR)

0003037 AV

DOCUMENT # A00000000742

1. Entity Name

WORKPLACE PROFESSIONAL INVESTORS, LTD.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 APR -5 PM 3: 14

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



3. Mailing Address

3801 PGA Boulevard  
Suite 600  
Palm Beach Gardens, FL 33410

3801 PGA Boulevard  
Suite 600  
Palm Beach Gardens, FL 33410

DUE BY MAY 1, 2002

4. FEI Number

65-1009776

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

REGSERV CORP.  
GARDENS CORPORATE CENTER  
3801 PGA BOULEVARD, SUITE 555  
PALM BEACH GARDENS FL 33410

7. Name and Address of New Registered Agent

REGSERV CORP.  
3801 PGA Boulevard  
Suite 600  
Palm Beach Gardens, FL 33410

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions  
as Shown on record.

\$1,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

\$1,000

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 # P00000045114  
NAME WORKPLACE PROFESSIONAL EQUITY CORPORATION  
STREET ADDRESS 3801 PGA BLVD., STE. 600  
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Patrick J. DiSalvo  
Vice President

2/20/02  
Date

561-630-5055

CR2E003 (9/01)