

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # A93000001364

1. Entity Name

WHC Limited Partners

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

163 East Morse Blvd.

3. Mailing Address

163 East Morse Blvd.

Suite, Apt. #, etc.

#230

Suite, Apt. #, etc.

#230

4. City & State

Winter Park, FL

City & State

Winter Park, FL

Zip

32789

Country

Zip

32789

Country

4. FEI Number

59-3213208

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Franklin F Ramseur III

Street Address (P.O. Box Number is Not Acceptable)

210 Colonial Lane

City

Longwood

FL

Zip Code

32750

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

Franklin F Ramseur III

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

4-30-02

DATE

9. Capital Contributions
as Shown on record.

10. Amount of Capital Contributions
in FLORIDA to date.

12,000

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 # P94000032434
NAME JRC Innovations, Inc
STREET ADDRESS 210 Colonial Lane
CITY-ST-ZIP Longwood, FL. 32750

STREET ADDRESS

200005754702--6

CITY-ST-ZIP

-06/11/02--01123--003

****472.75 ****172.75

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

84.00-Lp
88.75-Adm

DOCUMENT #
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CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

CR2E003B (12/01)

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:

Franklin F Ramseur III