

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000002117

1. Entity Name

WWM, LTD.

FILED

00 APR -6 AM 11:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

995 EAST MEMORIAL BLVD., SUITE 101
LAKELAND FL 33801

Mailing Address

P.O. BOX 725589
ATLANTA GA 31139-2589

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

58-2347006

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARTIN, E. SNOW ESQ
200 LAKE MORTON DRIVE
LAKELAND FL 33802

7. Name and Address of New Registered Agent

Name Howe D. Whitman
Street Address (P.O. Box Number is Not Acceptable)
1400 GRASSLANDS BLVD
UNIT 37
City LAKELAND FL Zip Code 33803

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$9,900.00

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 # F96000004948
NAME WHITMAN INVESTMENT CO., INC.
STREET ADDRESS 4102 WHITEWATER CREEK ROAD
CITY - ST - ZIP ATLANTA GA 30327

DOCUMENT # F00000000146
NAME HERITAGE EQUITIES INC.
STREET ADDRESS PO BOX 725589
CITY - ST - ZIP ATLANTA, GA 31139

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
(AMENDMENT FILED 2/2/2000)

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY - ST - ZIP
400003219514-7
-04/24/00-01018-022
****158.05 ****152.05

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

Howe D. Whitman 3/2/00 863-688-1201

Date

Daytime Phone #