

2001 UNIFORM BUSINESS REPORT (UBR)

0009889 AF

DOCUMENT # A98000000385			
1. Entity Name WRH FORTUNE, LTD.			
Principal Place of Business 100 SECOND AVE., SOUTH, SUITE 904 ST. PETERSBURG FL 33701		Mailing Address 100 SECOND AVE., SOUTH, SUITE 904 ST. PETERSBURG FL 33701	
2. Principal Place of Business 3515 W IRLB BROWNSON		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State KISSIMMEE FL		City & State	
Zip 34746	Country USA	Zip	Country
6. Name and Address of Current Registered Agent GERMAIN, BONNIE (BONNIE G. BERTOLINO) 100 SECOND AVE., SOUTH, SUITE 904 ST. PETERSBURG FL 33701		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
9. Capital Contributions as Shown on record. \$815,987.95		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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P93000036337 WRH PROPERTIES, INC. 100 SECOND AVE., SOUTH, SUITE 904 ST. PETERSBURG FL 33701	STREET ADDRESS	
		CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	
		CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	
		CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	
		CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	
		CITY-ST-ZIP	

FILED
01 FEB 15 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E003 (11/00)

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 REQUIRED James G. Miller 2-8-01 727-825-7705
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

500003746625
-02/22/01--01004--0181
****526.25 ****526.2