

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 29, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # A99000000593**

1. Entity Name

WILLIAM H. LEFKOWITZ FAMILY LIMITED PARTNERSHIP

Principal Place of Business

C/O WILLIAM H. LEFKOWITZ  
3100 N. OCEAN BOULEVARD #1008  
FT. LAUDERDALE FL  
33308

Mailing Address

C/O WILLIAM H. LEFKOWITZ  
3100 N. OCEAN BOULEVARD #1008  
FT. LAUDERDALE FL  
33308

2. Principal Place of Business

C/O WILLIAM H. LEFKOWITZ

3. Mailing Address

C/O WILLIAM H. LEFKOWITZ

Suite, Apt. #, etc.

5920 ALMOND TERRACE

Suite, Apt. #, etc.

5920 ALMOND TERRACE

City &amp; State

PLANTATION FL

City &amp; State

PLANTATION FL

Zip

33317

Country

Zip

33317

Country

4. FEI Number

65-0912031

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**SCHWARTZ HOWARD L  
C/O WILLIAM H. LEFKOWITZ  
3100 N. OCEAN BOULEVARD #1008  
FT. LAUDERDALE FL  
33308 US**7. Name and Address of New Registered Agent**

Name

LEFKOWITZ WILLIAM H

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

5920 ALMOND TERRACE

City  
PLANTATION

FL

Zip Code  
33317

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 **WILLIAM H. LEFKOWITZ****04/29/2001**

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. 1,000,000.00

10. Amount of Capital Contributions

in FLORIDA to date. 1,000,000.00

**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 #  
NAME WHL, LLC  
STREET ADDRESS 3100 N. OCEAN BLVD., #1008  
CITY-ST-ZIP FT. LAUDERDALE FL 33308DOCUMENT #  
NAME  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP**13. ADDRESS CHANGES ONLY**STREET ADDRESS 5920 ALMOND TERRACE  
CITY-ST-ZIP PLANTATION FL 33317STREET ADDRESS  
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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:** **WILLIAM H. LEFKOWITZ**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

GP

04/29/2001

Date

Daytime Phone #

CR2E003 (11/00)