FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

2005 FEB 16 PM 3:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F02000061500

1. Entity Name

WHSLA Gen-Par, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5102 West Laurel Street	T Veneracion 1050 Connecticut Ave.
Suite, Apt. #, etc.: Suite 700	Suite, Apt. #, etc.: 1050 Connecticut Ave
City & State: Tampa, FL	City & State: Washington D.C.
Zip: 33607 Country: USA	Zip: 20036 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 75-2711975 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: CT Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 SOUTH PINE ISLAND ROAD

City: Plantation FL Zip Code: 33324

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. I am familiar with, and accept the obligations of registered agent.

200046788412
02/17/05--01014--014 **150.00

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE	C
NAME	Rothenberg, Stuart M.
STREET ADDRESS	85 Broad Street
CITY-ST-ZIP	New York, NY 10004
TITLE	P/CEO
NAME	Thilo D. Best
STREET ADDRESS	5102 West Laurel Street
CITY-ST-ZIP	Tampa, FL 33607
TITLE	V/CFO
NAME	Jon A. DeLuca
STREET ADDRESS	5102 West Laurel Street
CITY-ST-ZIP	Tampa, FL 33607
TITLE	V/S
NAME	Patrick Tribolet
STREET ADDRESS	100 Crescent Court, Suite 1000
CITY-ST-ZIP	Dallas, TX 75201
TITLE	V
NAME	Thomas D. Ferguson
STREET ADDRESS	100 Crescent Court, Suite 1000
CITY-ST-ZIP	Dallas, TX 75201
TITLE	V/T
NAME	Josephine Scesney
STREET ADDRESS	85 Broad Street
CITY-ST-ZIP	New York, NY 10004

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CR2E034B (12/02)

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment to 2005 Annual Report for WHSLA Gen-Par, Inc.

10: Additional Officer: AT/AS
Mitchell S. Weiss
85 Broad Street
New York, NY 10004