PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

DOC 1. Corpor	RPORATION NSTATEMENT) L - U UMENT # F940000 ration Name R Investors, Inc.	Ji Secre	ARTMENT OF STATE m Smith etary of State DF CORPORATIONS		FILE 03 JAN 21 FALLANAS		
10 Hanover Square 10 Hanover Square Suite, Apt. #, etc. Suite, Apt. #		3. Mailing Office Ac 10 Hanover Squ Suite, Apt. #, etc.	ver Square #, etc.		800011123018 01/28/0301028006 **300.00		
		17th Floor	To		e Incorporated or Qualified Do Business in Florida 10/10/1994		
City & State City & State New York, NY New Yo		City & State New York, NY				Applied For	
Zip	Country Zip				68	Not Applicable	
10005	USA	10005	USA	6. CERTIFICAT		dditional Fee required Certificate of Status	
CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road Suite, Apt. #, Etc. City Plantation State FL 33324 B. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN							
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)							
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip		
VPD -	Rothenberg, Stuart M		85 Broad Street		New York, NY 10004		
VP	Neidich, Daniel M Lahey, Brian M		85 Broad Street 10 Hanover Square 20th Floor		New York, NY 10004 New York, NY 10005		
VPM	Rosenberg, Ralph		85 Broad Street		New York, NY 10005		
VP							
VP	Williams, Todd A Naughton, Kevin		85 Broad Street		New York, NY 10005 New York, NY 10004		
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #							

Goldman Sachs

November 6, 2002

Annual Report Filings
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

RE: WH1-PEOPLES SOUTHWEST GEN-PAR INC

WHCB GEN-PAR INC
WHC-SIX GEN-PAR INC
WHC-SIX GEN-PAR INC
WHLCA GEN-PAR INC
WHNML-S GEN-PAR INC
SKW GEN-PAR INC
W9/KL GEN-PAR INC

To Whom It May Concern:

W9/PHC GEN-PAR INC
WH INVESTORS GEN-PAR INC
WH TE-TWO INVESTORS GEN-PA
WHLNB GEN-PAR INC
WHML-S GEN-PAR INC
WHORL GEN-PAR INC
WHORL GEN-PAR INC
WHTR INVESTORS INC
WHUD GEN-PAR INC
WSK GEN-PAR INC

Enclosed please find Uniform Business Reports with remittances for the above-mentioned entities. Please note that these Reports, to date, were not delivered to the Mailing Address reflected in your records. We would ask that as a result of this, you waive any penalties and/or fees.

If you should have any questions, please contact me at 212-902-8012.

- 🖔 Thank you.
- Sincerely,

Jennifer L. Hanly Investment Tax Services

Enclosures

