FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000003358

. Corporation Name

WHUD GEN-PAR, INC.

	FI	LED		
May	v 10.	1999	8:00	am
			State	
		•/ 001.53.005.≯		

05-10-1999 90153 005 ***150.00



			_				}	1 (1014)		
Principal Place	of Business	Mailing Address				1 1841128 1119 18181 81111 ABIN SEV		- 17151 6		
100 CRESCENT	COURT	85 BROAD ST								
SUITE 1000		19TH FLOOR		1	DO NOT INDITE IN THE SPACE					
DALLAS TX 75201 NEW YORK NY 10004					 	DO NOT WRITE IN THIS SPACE				
US					İ	3. Date Incorporated or Qualifed				
		Address Address				07/13/1995 4. FEI Number		1 400	lied For	
<u> </u>			2a. Mailing Address				L	Applied For Not Applicable		
21		26				75-2571271	<u>¢</u> Ω		ditional	
Suite, Apt. #, etc.		<u> </u>	Suite, Apt. #, etc.			5. Certifcate of Status Desired		e Req		
		City & State	City & State			- El E - O - de- Fissado-	· — · · · · · · ·			
City & State	9	├ 			}	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
23	Country		Zip Country			(100.1-0.7)				
Zip		⊢	n ' [İ	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No				
24	25	29	30			10. Name and Address of New Registered Agent				
	9. Name and Address of Current	Registered Agent		81 Name		10. Halite dia Addition of them it				
СТІ	CORPORATION SYSTEM									
	SOUTH PINE ISLAND ROAD			82 Stree	et Address	(P.O. Box Number is Not Accepta	ble)			
1	NTATION FL 33324		}	83						
100	TATION TE GOOET		ł	03					}	
			Ì	84 City	-		85	Zip Co	ode	
					. .		FL [3]		- sistered	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes.										
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOT	E: Registered	gent signatur	e required who		DATE			
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFF				
TITLE	DVP	☐ DELETE	1.1 TIT	.E	1		☐ Ch	ange	Addition	
NAME	ROTHENBERG, STUART M		12 NA	JE						
STREET ADDRESS 85 BROAD ST		1.3 STI	1.3 STREET ADDRESS							
CITY-ST-ZIP	NEW YORK NY 10004		1.4 CIT	Y-ST-ZIP						
TITLE	Р	☐ DELETE	2.1 TIT	E	}		☐ Ch	ange	Addition	
NAME	NEIDICH, DAVID M		2.2 NA	ΛE						
STREET ADDRESS	85 BROAD ST		2.3 ST	REET ADDRES	ss				Ì	
CITY-ST-ZIP	NEW YORK NY 10004	_	2.4 Cf	Y-ST-ZIP						
TITLE	VP	▼ DELETE	3.1 TIT	Ē	VPA	T	[X]Ch	ange	☐ Addition	
NAME	KLINGHER, MICHAEL K		3.2 NA	ME	Bria	in J. Lahey	•			
STREET ADDRESS	85 BROAD ST		33 ST	REET ADDRES	is 10 +	in J. Lahey lanover Square				
CITY-ST-ZIP	NEW YORK NY 10004		3.4. CF	Y-ST-ZIP	NY	20001 FN				
TITLE	VPST	☐ DELETE	4.1 777	.E			☐ Ch	ange	☐ Addition	
NAME	NAUGHTON, KEVIN D		4. 2 NA	ME					•	
STREET ADDRESS			4.3 ST	REET ADDRES	ss					
CITY-ST-ZIP	NEW YORK NY 10004		1	Y-ST-ZIP						
TITLE	VPAS	☐ OELETE	5.1 TIT				□ Ch	ange	☐ Addition	
NAME	ROSENBERG, RALPH F		5.2 NA	ME						
STREET ADDRESS	85 BROAD ST		5.3 ST	REET ADDRES	ss				Ì	
	NEW YORK NY 10004			Y-ST-ZIP						
CITY-ST-ZIP	VPAS	☐ DELETE	6.1 717				CH	ange	Addition	
!!!		<u> </u>	6.2 NA	ME			_			
NAME	O'BRIEN, ELIZABETH A			REET ADDRES	ss					
STREET ADDRESS	85 BROAD STREET				~					
CITY-ST-ZIP	NEW YORK NY 10004		6.4 CI	Y-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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRECTOR

APR 2 8 1999

Daytime Phone #

CR2E034 (11/98)