

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000009932

1. Entity Name
WPB INVESTMENTS, L.L.C.

Principal Place of Business
2000 N. FLORIDA MANGO RD., SUITE 200
WEST PALM BEACH FL 33409

Mailing Address
2000 N. FLORIDA MANGO RD., SUITE 200
WEST PALM BEACH FL 33409

APPROVED
AND
FILED

01 APR 27 PM 4:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3540 Forest Hill Blvd

3. Mailing Address
3540 Forest Hill Blvd

Suite, Apt. #, etc.
#203

Suite, Apt. #, etc.
#203

City & State
West Palm Beach FL

City & State
West Palm Beach FL

Zip
33406

Country
USA

Zip
33406

Country
USA

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CARREJA, MINDY L
220 S. FRANKLIN ST.
TAMPA FL 33602

Name
Deborah A. Dentry

Street Address (P.O. Box Number is Not Acceptable)
3540 Forest Hill Blvd

#203

City West Palm Beach FL Zip Code 33406

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 *Deborah A. Dentry*

4/25/01

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

4000004194804-9
-05/11/01--01011--013
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
Manager
WPB Management Inc
3540 Forest Hill Blvd #203
West Palm Beach FL 33406

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Deborah A. Dentry*
office of WPB Management Inc

4/25/01

561-433-4810

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

0013830 AF

CR2E083 (11/00)