2001 UNIFORM BUSINESS REPORT (UBR)

02-25-2002 90488 001 ****61.25 DOCUMENT # N08376 02-25-2002 90488 002 ***236.25 N08376 1. Entity Name FILED WHISPERING LAKES SERVICE ASSOCIATION, INC. Principal Place of Business Mailing Address Mar 29, 2002 8:00 A.M. 2183 N. POWERLINER 2183 N. POWERLINER STE 1 Secretary of State POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2441795 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent S. 10211 pradley Street Address (P.O. Box Number is Not Acceptable) MCKINNEY, JAMES D. 2101 NW 33RD ST., SUITE 700 2183 N. Powerline POMPANO-BCH. FL 33069 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Pavable to Trust Fund Contribution. After September 12, 2001, min. will be \$236.25 Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TIRE Po Change TITLE Bradley S. Kozin Brenner Scott NAME NAME 2183 N. Powerline Rd#1 3195 N. POWERLINE RD., SUITE 104 STREET ADDRESS STREET ADDRESS Pompanoach, F133009 CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33069 TITLE Brian Horavitz SD □ Change 40 MCKINNEY, JOHN T.623 NAME NAME HILLSBORD BIVD. 2101 NW 33RD ST. #700 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP POMPANO BCH. FL TITLE SD TITLE ☐ Change ☐ Addition Delete PATTON, OWEN NAME NAME STREET ADDRESS 2150 NW 33 STREET STREET ADDRESS CITY-ST-7IP POMPANO BEACH FL 33069 CITY-ST-ZIP Change Addition TITLE Delete – TITLE -NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TIPLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of 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 617, Florida Statutes and that my name appears in Block 10 or Block 11 if changed, or on an attact ment with an address, with all other like impowered.

PRINTED NAME OF SIGNING OFFICER OR DIRECTO



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2183 N. Powerline Rd., Suite 1 Pompano Beach, FL 33069

> Phone: (954) 973-2122 Phone: (954) 956-7172 Fax: (954) 956-8898

internet: www.kozincom.com

March 27, 2002

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: Whispering Lakes Service Association (Ref Number: N08376)

To Whom It May Concern:,

Pursuant to your letter of March 8, 2002, following is executed 2001 Uniform Business Report for the above referenced company.

If you have any questions or require additional information, please feel free to give me a call.

Very truly yours, Kozin Commercial Properties, Inc.

R. Mark Stephenson

As Agent for Whispering Lakes

Service Association, Inc.

RMS/hcm

Brokerage Management Services