

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000110645

1. Entity Name  
WHEREABOUTS, INC.

Principal Place of Business  
9432 BOCA RIVER CIRCLE  
BOCA RATON FL 33434

Mailing Address  
9432 BOCA RIVER CIRCLE  
BOCA RATON FL 33434

2. Principal Place of Business  
23123 STATE RD 7  
Suite, Apt. #, etc.  
SUITE 223  
City & State  
BOCA RATON FL

3. Mailing Address  
23123 STATE RD 7  
Suite, Apt. #, etc.  
SUITE 223  
City & State  
BOCA RATON FL

Zip  
33428  
Country  
USA

Zip  
FL 33428  
Country  
USA

4. FEI Number  
65-1054249  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

PALEY, GREGG M ESQ  
350 FAIRWAY DRIVE SUITE 101  
DEERFIELD BEACH FL 33441

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
FL Zip Code

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

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☒

**FILE NOW!!! FEE IS \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 11. OFFICERS AND DIRECTORS

|  |                                 |
|--|---------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete |

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|  |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID R BETZ 8/20/01 561-470  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**FILED**  
**Aug 31, 2001 8:00 am**  
**Secretary of State**  
08-31-2001 90111 006 \*\*\*150.00

007727 AV

CR2E034 (5/01)

ATTACHMENT  
A0083096

August 20, 2001

P000000110645

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Whereabouts, Inc.  
23123 State Rd 7 Suite 223  
Boca Raton, FL 33428

To Whom It May Concern:

As per a conversation with your office on August 8, 2001, we are submitting this 2001 Uniform Business Report with a filing fee of \$150.00. Our company was incorporated within the last year and we never received the first notice of filing. When this was explained to your office we were advised to provide a letter attesting to this and to include a fee of \$150.00.

We thank you for the consideration.

Sincerely,



David Betz  
President  
Whereabouts, Inc.