

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90665 036 ***150.00

DOCUMENT # P95000084256

1. Entity Name

WORLDWIDE HOUSING INTERNATIONAL, INC.

Principal Place of Business

**737 SW 57TH AVE
 Ocala FL 34474**

Mailing Address

**737 SW 57TH AVE
 Ocala FL 34474**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3345096

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WISE, LOUIE F III
 737 SW 57TH AVE
 Ocala FL 34474**

Name **LOUIE F. WISE JR.**

Street Address (P.O. Box Number is Not Acceptable)

737 SW 57TH AVE

City **OCALA**

FL

Zip Code **34474**

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

LOUIE F. WISE JR.

PRESIDENT

(NOTE: Registered Agent's signature required when reinstating)

DATE

4/25/02

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 \$150.00
 After May 1, 2002 Fee will be \$550.00
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☒ Delete
 NAME **WISE, LOUIE F II**
 STREET ADDRESS **8159 SW 34TH PLACE**
 CITY-ST-ZIP **OCALA FL 34481**

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

TITLE **DV** ☐ Delete
 NAME **WISE, LOUIE F JR**
 STREET ADDRESS **8199 SW 34TH PLACE**
 CITY-ST-ZIP **OCALA FL 34481**

TITLE **PRESIDENT** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **737 SW 57TH AVE**
 CITY-ST-ZIP **OCALA, FL 34474**

TITLE **DT** ☐ Delete
 NAME **WISE, JUDY**
 STREET ADDRESS **8199 SE 34TH PLACE**
 CITY-ST-ZIP **OCALA FL 34481**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS **737 SW 57TH AVE**
 CITY-ST-ZIP **OCALA, FL 34474**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME **SECRETARY**
 STREET ADDRESS **STEVEN ROWLEY**
 CITY-ST-ZIP **3792 NE OCEAN BLVD #110**
JENSEN BEACH, FL 34957

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

13. 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 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

LOUIE F. WISE JR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

Date

Daytime Phone #

4/25/02 (352) 237-6272

CR2E034 (9/01)