

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000100543

1. Entity Name

JWH FINANCIAL PRODUCTS, INC.

FILED

Jan 26, 2000 8:00 am  
Secretary of State

01-26-2000 90047 033 \*\*\*150.00

Principal Place of Business

Mailing Address

301 YAMATO ROAD  
SUITE 2200  
BOCA RATON FL 33431-4931

301 YAMATO ROAD  
SUITE 2200  
BOCA RATON FL 33431-4931

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0717603

Applied For

Not Applied For

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

MITCHELL, MARK H  
301 YAMATO ROAD  
SUITE 2200  
BOCA RATON FL 33431-4931

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 \$150.00**  
**After MAY 1, 2000 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 ☐ Delete  
NAME D  
STREET ADDRESS MITCHELL, MARK H.  
CITY-ST-ZIP 301 YAMATO ROAD, SUITE 2200  
BOCA RATON FL

TITLE ☐ Change ☒ Addition  
NAME Vice President  
STREET ADDRESS EicbyndoniTefft  
CITY-ST-ZIP One Glendinning Place  
Westport, CT 06880

TITLE ☐ Delete  
NAME P  
STREET ADDRESS STANIEWICZ, JULES A.  
CITY-ST-ZIP 301 YAMATO ROAD, SUITE 2200  
BOCA RATON FL

TITLE ☐ Change ☒ Addition  
NAME Vice President  
STREET ADDRESS Verne O. Sedlacek  
CITY-ST-ZIP One Glendinning Place  
Westport, CT 06880

TITLE ☐ Delete  
NAME D  
STREET ADDRESS HENRY, JOHN W  
CITY-ST-ZIP 301 YAMATO ROAD, SUITE 2200  
BOCA RATON FL

TITLE ☐ Change ☒ Addition  
NAME Vice President  
STREET ADDRESS Mark S. Rzepczynski  
CITY-ST-ZIP 301 Yamato Road, Suite 2200  
Boca Raton, FL 33431

TITLE ☐ Delete  
NAME D  
STREET ADDRESS TWIST, EDWIN B.  
CITY-ST-ZIP 301 YAMATO ROAD, SUITE 2200  
BOCA RATON FL

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

TITLE ☐ Delete  
NAME VP  
STREET ADDRESS KENTON, ELIZABETH A.A.  
CITY-ST-ZIP ONE GLENDINNING PLACE  
WESTPORT CT

TITLE ☒ Change ☐ Addition  
NAME Kenton, Elizabeth A. M.  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME S  
STREET ADDRESS KOZAK, DAVID M.  
CITY-ST-ZIP ONE GLENDINNING PLACE  
WESTPORT CT

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/10/00