

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000092382

1. Entity Name

WHISPERING WATERS GENPAR, INC.

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 90997 015 ***150.00

Principal Place of Business

3195 NORTH POWERLINE ROAD #104
POMPAÑO BEACH FL 33069

Mailing Address

3195 NORTH POWERLINE ROAD #104
POMPAÑO BEACH FL 33069

2. Principal Place of Business

1000 E. Hillsboro Boulevard
Ste 100
Deerfield Beach, FL 33441

3. Mailing Address

1000 E. Hillsboro Boulevard
Ste 100
Deerfield Beach, FL 33441

C0058436



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0882665

Applied For

Not Applicable

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

BRENNER, SCOTT F
3195 NORTH POWERLINE ROAD #104
POMPAÑO BEACH FL 33069

Name

SAME

1000 E. Hillsboro Boulevard
Ste 100
Deerfield Beach, FL 33441

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered agent.

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, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	D BRENNER, SCOTT F 3195 NORTH POWERLINE ROAD #104 POMPAÑO BEACH FL 33069	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOPELMAN, MARC A 3195 NORTH POWERLINE ROAD #104 POMPAÑO BEACH FL 33069	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOROWITZ, BRIAN 3195 NORTH POWERLINE ROAD #104 POMPAÑO BEACH FL 33069	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOROWITZ, HYMAN B 3195 NORTH POWERLINE ROAD #104 POMPAÑO BEACH FL 33069	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Scott Brenner 1000 E. Hillsboro Blvd., Suite 100 Deerfield Beach, FL 33441	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Marc Kopelman 1000 E. Hillsboro Blvd., Suite 100 Deerfield Beach, FL 33441	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Brian Horowitz 1000 E. Hillsboro Blvd., Suite 100 Deerfield Beach, FL 33441	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Hy Horowitz 1000 E. Hillsboro Blvd., Suite 100 Deerfield Beach, FL 33441	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS 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)(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

MARC KOPELMAN

4/5/01

Date

254-978-9962

Daytime Phone #

CR2E034 (10/00)