

# 2001 UNIFORM BUSINESS REPORT (UBR)

0020503 SP

DOCUMENT # **A98000002562**

1. Entity Name

**GOLDEN BEAR HOLDINGS, LTD.**

Principal Place of Business  
**11780 U.S. HIGHWAY #1, SUITE 300  
NORTH PALM BEACH FL 33408**

Mailing Address  
**11780 U.S. HIGHWAY #1, SUITE 300  
NORTH PALM BEACH FL 33408**

**FILED**  
**MAR 19 AM 11:04**  
**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**11780 U.S. Highway One**  
Suite, Apt. #, etc.  
**Suite 400**

3. Mailing Address  
**11780 U.S. Highway One**  
Suite, Apt. #, etc.  
**Suite 400**

City & State  
**North Palm Beach, FL**

City & State  
**North Palm Beach, FL**

4. FEI Number  
**65-0916109**

Applied For  
☐ Not Applicable

Zip  
**33408**

Country  
**USA**

Zip  
**33408**

Country  
**USA**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

## 6. Name and Address of Current Registered Agent

**FHS CORPORATE SERVICES, INC.**  
**11780 U.S. HIGHWAY #1**  
**SUITE 400-300**  
**NORTH PALM BEACH FL 33408**

## 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. Capital Contributions  
as Shown on record. **\$1,000.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

11. **MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

## 12. GENERAL PARTNER INFORMATION

DOCUMENT #  
NAME **NICKLAUS, JACK W**  
STREET ADDRESS **11780 U.S. HIGHWAY #1, SUITE 300**  
CITY-ST-ZIP **NORTH PALM BEACH FL 33408**

DOCUMENT #  
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CITY-ST-ZIP

## 13. ADDRESS CHANGES ONLY

STREET ADDRESS  
CITY-ST-ZIP **700003891027--2  
-03/21/01--01097--015  
\*\*\*\*\*52.50 \*\*\*\*\*52.50**

STREET ADDRESS  
CITY-ST-ZIP **700003891027--2  
-03/21/01--01097--016  
\*\*\*\*\*88.75 \*\*\*\*\*88.75**

STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

**Jack W. Nicklaus**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**2/20/01** **561/626-3900**

Date

Daytime Phone #

CR2E003 (11/00)