

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**DOCUMENT # A98000002562**

1. Entity Name  
**GOLDEN BEAR HOLDINGS, LTD.**



Principal Place of Business  
**11780 U.S. HIGHWAY #1, SUITE 500  
NORTH PALM BEACH, FL 33408**

Mailing Address  
**11780 U.S. HIGHWAY #1, SUITE 5400  
NORTH PALM BEACH, FL 33408**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03282007

Chg-LP

CR2E003 (12/06)

4. FEI Number

**65-0916109**

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

**HAILE, SHAW & PFAFFENBERGER, P.A.  
660 U. S. HIGHWAY ONE  
3RD FLOOR  
NORTH PALM BEACH, FL 33408**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FILE NOW!!! FEE IS \$500.00  
After May 1, 2007, Fee will be \$900.00**

**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

13. ADDRESS CHANGES ONLY

DOCUMENT #

NAME

**NICKLAUS, JACK W**

STREET ADDRESS

**11780 U.S. HIGHWAY #1, SUITE 500**

CITY-ST-ZIP

**NORTH PALM BEACH, FL 33408**

STREET ADDRESS

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CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

**4.24.07**

**561.287-6320**

**JACK W. NICKLAUS**

**FILED**

**2007 APR 30 AM 9:21**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**



STAPLE CHECK HERE