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Feb 11, 1999 8:00am

Secretary of State

02-11-1999 90016 019 \*\*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F97000006544

1. Corporation Name  
OXBOW MINING, INC.

Principal Place of Business  
1601 FORUM PLACE, SUITE P2  
WEST PALM BEACH FL 33401

Mailing Address  
1601 FORUM PLACE, SUITE P2  
WEST PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
12/11/1997

4. FEI Number  
65-0777162

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

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME ACTON, BRIAN L  
STREET ADDRESS 1601 FORUM PLACE, SUITE P2  
CITY-ST-ZIP WEST PALM BEACH FL 33401

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE EV  
NAME FRITZLER, PAUL S  
STREET ADDRESS 7901 SOUTHPARK PLAZA SUITE 202  
CITY-ST-ZIP LITTLETON CO 80120

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE SD  
NAME CALLAHAN, RICHARD P  
STREET ADDRESS 1601 FORUM PLACE, SUITE P2  
CITY-ST-ZIP WEST PALM BEACH FL 33401

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE TD  
NAME SHIPLEY, ZACHARY  
STREET ADDRESS 1601 FORUM PLACE, SUITE P2  
CITY-ST-ZIP WEST PALM BEACH FL 33401

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE D  
NAME CHERRY, BERNARD H  
STREET ADDRESS 1601 FORUM PLACE, SUITE P2  
CITY-ST-ZIP WEST PALM BEACH FL 33401

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE EV  
NAME WRIGHT, WALTER  
STREET ADDRESS HIGHWAY 133 (SOMERSET MINING COMPANY)  
CITY-ST-ZIP SOMERSET CO 81434

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 annual report or supplemental annual 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 12 or Block 13 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

Richard P. Callahan

1/12/99

561-697-4300

Date

Daytime Phone #

CR2E034 (1/98)