FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K93963

(2)

_	FILEL)
Feb 25	1998	8:00am
Secre	etary o	of State

	GOLDE	n mana(GEMENT, INC.											
Principal Place of Business Mailing Address									T 18816111 010 19100 11110 18110 81100 1111 51011 ALOIT	Billi Bi	OUI OFFIII	DIGIA 1804		
				P.O. BOX							•			
4000 16 000 1001100 1101			OTTSDALE AZ 85261					DO NOT HIDITE BUTHING						
SCOTTSDALE AZ 85253								-	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
ı	JS								ŀ	J.	06/06/1989			
2.	Principal Pl	lace of Business 2a. Mailing Address					4.			4.	FEI Number	T	Ap	plied For
21				26				ł		59-2960060		Not	Applicable	
	Suite, Apt.	#, e1c.			Suite, Apt. #, etc.				6	Certificate of Status Desired	T -		dditional	
22				27					٠.			ee Re	·	
23	City & State	•		City & 28	City & State			6. Election Campaign Financing \$5.00 May B Trust Fund Contribution Added to Fees						
	Zip		Country	Zip		Cour	ntry			8.	This corporation owes or has paid the curr			
24			26	29		30					To the state of th	Yes		No
		<u> </u>	and Address of Curre	ent Registered A	gent		81			10.	Name and Address of New Registered A	Agent		
		ATTIE, RICI					ויש	Name						
			I CENTER DRIVE, SU	JITE 704		1	B2	Street /	Address	(P.	O. Box Number is Not Acceptable)			
VENICE FL 34185						83								
						Ī	64	City			FL	85	Zip C	ode
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.														
SI	GNATURE .										reinstating) DATE			
12		Signature, typod	or printed name of registered at	gent and tille II applicat ND DIRECTORS	sie. (NOTE	Registered	Ager	nt signature	required w		ADDITIONS/CHANGES TO OFFICERS AND	DIRE	CTOR	S IN 12
TIT		Р	- Criticano i	TO DITEOTOTIO	DELETE	1.1 TIT	l E					☐ Ch		☐ Addition
NA.	1	BEATTIE	E, RICHARD P			1.2 NA	ME							
\$T	REET ADDRESS	ADDRESS 5330 E. PALOMINO ROAD				1.3 STI	REET	ADDRESS						
CIT	ry-st-zip	SCOTTS	SDALE AZ 85253			1.4 CII	Y-\$1	r-ZIP						
TIT	LE	VP			DELETE	2.1 TIT	LE					☐ Ch	ange	☐ Addition
NA	ME		E, GLENN A			2.2 NA								
	reet address	ADDITIONAL TV TANAL						address			\$ 100			
	Y-ST-ZIP	- October			2. 4 CI		iT - ZiP					ange	Addition	
	TITLE S NAME BEATTIE, MICHELLE E					3.1 TITLE 3.2 NAME								
NAME BEATTIE, MICHELLE E STREET ADDRESS 5330 E. PALOMINO ROAD					3.2 NAME 3.3 STREET ADDRESS									
	TY-ST-ZIP		SDALE AZ 85253			3.4. Cf								
TIT		200111			DELETE	4.1 TJT						☐ Ch	ange	Addition
NA	1					4. 2 NA	AME							

14. Thereby 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 truetoe 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 the address.

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

alulas

Change

Change

Addition

☐ Addition