

2001 UNIFORM BUSINESS REPORT (UBR)

8868000

DOCUMENT # L92000000060

1. Entity Name
GOLF PARK, L.C.

FILED
01 APR 27 AM 1:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
6670 SE 96TH PLACE ROAD
BELLEVUE FL 34420

Mailing Address
444 BRICKELL AVENUE, SUITE 51-246
MIAMI FL 33131

2. Principal Place of Business
6670 SE 96th Place Road
Suite, Apt. #, etc.

3. Mailing Address
444 Brickell Ave.
Suite, Apt. #, etc.
51-246

City & State
Bellevue, Florida

City & State
Miami, Florida

4. FEI Number 65-0396935

Applied For
 Not Applicable

Zip 34420 **Country** USA

Zip 33131 **Country** U.S.A.

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

IBC FIDUCIARY INC.
100 S.E. 2ND STREET
SUITE 2315
MIAMI FL 33131

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. (NOT) Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM IBC FIDUCIARY INC. 100 SE 2ND ST #2315 MIAMI FL 33131 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EUROPEAN INVESTMENTS INC. 444 BRICKELL AVE., PMB 51-246 MIAMI FL 33131 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STILLEX CORP. 723 RIDEAU RD. CALGARY, ALBERTA CA 33131 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CANADIAN FUNDS, INC. 6670 SE 96TH PLACE ROAD BELLEVUE FL 34420 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AG EQUITIES, INC. 444 BRICKELL AVE., PMB 51-246 MIAMI FL 33131 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM REDSHIRE II CORP. 1602 ALTON RD., PMB 500 MIAMI BEACH FL 33131 <input checked="" type="checkbox"/> Delete

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EUROPEAN INVESTMENTS INC. Plaza 51-246 Miami, 33131 FL, USA <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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AG EQUITIES CORP. 444 Brickell Ave. - #51-246 Miami, FL 33131 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEUTSCHE FINANZ A.G. CORPORATION 9 rue Schiller Lux, Europe 2519 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *J. Nealey* **Herley** 04/21/01 (305) 358-4441

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (11/00)