APPROVED

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000007803 1. Entity Name 00 MAY -6 AM 10: 41 THE BEAR'S CLUB REALTY COMPANY, L.L.C. SECRETARY OF STATE Principal Place of Business Mailing Address 2000 PGA BLVD., SUITE 2204 2000 PGA BLVD.. SUITE 2204 NORTH PALM BEACH FL 33408-2713 NORTH PALM BEACH FL 33408 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. . Applied For City & State City & State 65-098/21R Not Applicable Zip Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FHS CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 11780 U.S. HIGHWAY ONE, SUITE 300 NORTH PALM BEACH FL 33408 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State MANAGING MEMBERS/MEMBERS 10. ADDITIONS/CHANGES 9. **MGRM** ☐ Change Addition TITLE ☐ Delete TITLE WHITLEY, ROBERT NAME STREET ADDRESS 2000 PGA BLVD., SUITE 2204 STREET ADDRESS NORTH PALM BEACH FL 33408 CITY-8T-ZIP CITY-8T-ZIP Addition Deteta TITLE TITLE NAME RIAME STREET ADDRESS STRIFT ADDRESS CITY- ST- ZIP ... CITY- ST- 7IP TITLE 06/01/00--01059 NAME NAME *****50.00 *****50.00 STREET ADDRESS STREET ADDRESS CITY- ST- ZIP CITY-\$T-ZIE Change Addition Detete TITLE TITLE MAME STREET ADDRESS STREET DORESS CITY- ST- ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE NAME STREET, ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Delete TITLE Addition 🔲 TATLE . NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.