## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

DOCUMENT # L9900007803  1. Entity Name  THE BEAR'S CLUB REALTY COMPANY, L.L.C.							FILED				
						01 MAR -9 AM 10: 34					
						SECRETARY OF STATE TALLAHASSEE, FLORIDA					
Principal Place of Business Mailing Address						TALLAF	ASSEE, F	Lorida	4		
	LVD SUITE 2204 M BEACH FL 33408		2000 PGA BLVD SUITE 2204 NORTH PALM BEACH FL 33408			l jarnán áta	1811 <b>4   B</b> 111 <b>  B</b> 1111 <b>  S</b> 111	1 BBUI 86UI 1		ENIES tork radio	
			1780 U.S. Highway One								
		Suite, Apt. #, etc. Suite 400	uite 400			DO NOT WRITE IN THIS SPACE					
City & State		City & State North Palm Be	City & State orth Palm Beach, FL			El Number (	65-0981218		<del></del>	oplied For ot Applicable	
Zip	Country	Zip 33408	•		1.5 Certificate of S		Status Desired Status				
	6. Name and Address of Current F	legistered Agent			7. N	ame and Add	ress of New Re	gistered A	gent		
EHS COE	DDODATE SEDVICES INC			Name —							
FHS CORPORATE SERVICES, INC. 11780 U.S. HIGHWAY ONE, SUITE 300				Street Address (P.O. Box Number is Not Acceptable)							
NORTH P	PALM BEACH FL 33408										
			J	City				FL	Zip Cod	е	
		FILE N Make Check P	NOW!!! F Payable to		•	•					
9.	MANAGING MEMBE	RS/MEMBERS	10.				ADDITIONS/C	HANGES			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WHITLEY, ROBERT 2000 PGA BLVD., SUITE 2204 NORTH PALM BEACH FL 33408	☐ Delete	1	T ADDRESS ST-ZIP					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete		T address St-zip	MEMBER Golden B 11780 U. North Pa	S. Highv	vay One,			XX Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS	Member Tucker F	rederick S. Highw	cson ay One,	Suite	<del>-</del> - •	XIX Addition	
TITLE NAME STREET ADDRESS: CITY-ST-ZIP		☐ Delete		T ADORESS ST-ZIP		900	00038 -03/21/ *****5	010	1109	Addition  Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	٠	☐ Delete		T ADDRESS ST-ZIP					Change	Addition	
1		☐ Delete	TITLE NAME STREE CITY-	f address St-Zip	ŀ				☐ Change	Addition	
indicated	pertify that the information supplied with the on this report is true and accurate and the billity company or the receiver or trustee of the company of the receiver of the receiver of the receiver of the company of the receiver of the r	nat my signature shall have empowered to execute this	or the exeme the same report as	or-ZiP option stallegal effe required i	ect as if made un	der oath; that Florida Statute	l am a managin es.	urther cert g membe	ify that the in	of the	

Golden Bear Properties, Inc.its Member

Daytime Phone #