

FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.

CORPORATION
ANNUAL REPORT
1992



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

MAR-5'92

000003198080

Read Instructions on Other Side Before Making Entries
FILING FEE \$61.25 Make Payable To: Secretary of State

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation DOCUMENT 100000001942

GOLDEN BAY LODGE, INC.
2001 S OCEAN DR
HALLANDALE FL 33009-6600

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address

22 P.O. Box No.

23 City and State

24 Zip Code

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2

3. Date Incorporated or Qualified
To Do Business in Florida

09/24/1959

3a. Date of Last Report
03/19/1991

4. FEI Number
59-0882010

FEI Number Applied For

FEI Number Not Applicable

5. \$8.75 Additional Fee required
for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information)

1	2	3	4	5
Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	Zip Code
1	S	TASKER, SHIRLEY	2001 S OCEAN DR	HALLANDALE, FL 00000
2	P	DESPOSATI, L.	2001 S OCEAN DR	HALLANDALE, FL 00000
3	V/P	STONE, LKB.	2001 S OCEAN DR	HALLANDALE, FL 00000
4	P	LA MORGESE, R	2001 S OCEAN DR	HALLANDALE, FL 00000
5	D	H. BEFUMO	2001 S OCEAN DR.	HALLANDALE, FL.
6	T	ECKERT, J.	2001 S. OCEAN DR	HALLANDALE, FL

REGISTERED AGENT INFORMATION

8. Name and Address of New Registered Agent

7. Name and Address of Current Registered Agent

LA MORGESE, ROSE
2001 S OCEAN DR
HALLANDALE, FL 33009

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City

FL.

85 Zip Code

9. Pursuant to the provisions of Sections 607.0402 and 607.1506 or Sections 617.0502 and 617.1508, 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. Last familiar with and accept the obligations of Section 607.0405, Florida Statutes.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

10. This corporation has liability for information under S. 199.032, Florida Statutes. Yes ☐ No ☒ (For information see instructions on other side)

11. I 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. I further certify that I am an officer or director of this corporation or the registered agent or broker empowered to execute this report as required by Chapter 617 of Florida Statutes, and that my name appears in Block 6 as an officer or director.

SIGNATURE *Rose La Morgese*

DATE

Typed Name of Signing Officer or Director

Title

Telephone Number (Daytime)

ROSE LAMORGESE

PRESIDENT

(454) 0518

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional \$5.00 to the filing fee

ROSE LAMORGESE