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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000023025 (8)

## GOLDEN BEAR OF PINELLAS, INC. Principal Place of Business Mailing Address 12450 STARKEY ROAD 12450 STARKEY ROAD **LARGO FL 34643** SUITE 400 LARGO FL 33773-2613 3. Date Incorporated or Qualified 3a. Date of Last Report 03/29/1993 04/30/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3172242 26 Not Applicable Suite Apt # etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζφ Country Ζıρ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes 🗶 Yes 🔲 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GEORGATOS, CHRIS 12450 STARKEY ROAD 62 Street Address (P.O. Box Number is Not Acceptable) SUITE 400 В3 LARGO FL 34643 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607 09/2 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am family with, and accept the appointment as registered agent. I am family with, and accept the of ligations of Section 607.0505. Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) (6) TITLE □ DELETE 1.1 TITLE Change GEORGATOS, CHRIS NAME 1.2 NAME 11201 TRADEWINAS BLVD. 1.3 STREET ADDRESS STREET ADDRESS SEMINOLE FL CITY - ST - ZIP 1.4 City - St - ZiP DELETE THE 21 TITLE Change Addition NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIF 2. 4 CITY - ST- ZIP DELETE TIL.F 3.1 TITLE Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - \$1 - 70° 3.4. CITY-ST-ZIP DELETE THUE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHY-ST-7P 4.4 CITY-ST-ZIP DELETE 100 F 5.1 TITLE ☐ Change ☐ Addition NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS

14. I do 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 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 orienter of the opporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 or Block (appears in Block

5,4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CHY-St-70

STREET ADDRESS

CITY-ST-ZIE

TITLE

NAME

SHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

GOOKEMOS !

1 + (813) 56-5131

Change

Addition

**FILED** 

Apr 16 1997 8:00am

Secretary of State