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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600007657 (5)

GOLD INVESTMENTS OF PONTE VEDRA, INC.

Principal Place of Business

Mailing Address

FILED Feb 03 1998 8:00am Secretary of State



| 100 EXECUTIVE WAY STE 101 100 EXECUTIVE WAY STE 101 PONTE VEDRA BEACH FL 32082 PONTE VEDRA BEACH FL 32082 | | | | | | |
|---|---|--------------------------|-----------------------|----------|--|--|
| | | | | | DO NOT WRITE IN THIS SPACE | |
| | | | | | 3. Date Incorporated or Qualified 01/24/1996 | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | , | , | 4. FEI Number Applied For | |
| 21 (30/0) | HNUEST MONTS | of Preside) Golo inverse | mon | 5011 | P.J. Tric. 59-3360582 Not Applicable | |
| Suite, Apt. | #, efc. | Suite, Apt. #, etc. | | | S Certificate of Status Desired \$8.75 Additional | |
| City & State | 1 al Cu | City & State | | CIRO | | |
| 23 PONTE | Vepra Bon FI Country | 28 SONTE VOOLA CE | Country | | R. This corporation owes or has paid the current year Intangible | |
| 24 3 208 | | NS 29 32081 30 | | . Joh | Personal Property Tax due June 30. Yes No | |
| 24 9000 | g. Name and Address of C | | | · 00 m | 10. Name and Address of New Registered Agent | |
| GO | LD, KEITH D | | 81 | Name | 0 | |
| | EXECUTIVE WAY STE 101 | | 92 | Ctroot | et Address (P.O. Box Number is Not Acceptable) | |
| PONTE VEDRA BEACH FL 32082 | | | | Sueer | a Address (P.O. Box Number is Not Acceptable) | |
| | | | 83 | | | |
| | | | 84 | City | 85 Zip Code | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | |
| SIGNATURE Signature, typed or printed name of registered agent and talk if applicable (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | |
| 12. | OFFICER | S AND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | 0 | ☐ DELETE | 1.1 TITLE | | DP Change Addition | |
| NAME | gold, Keith D | | 1.2 NAME | | GOLD, KEITH D. | |
| STREET ADDRESS | 100 EXECUTIVE WAY ST | | 1.3 STREET | ADDRESS | 6000C Sawgrass Village Circle | |
| CITY-ST-ZIP | PONTE VEDRA BEACH I | | 1.4 CITY - S | 1 - ZIP | Ponto Vodova Posch Pr 2002 | |
| TITLE | | ☐ DELETE | 2.1 TITLE | | Politice vedera Beach, In promise [] Addition | |
| NAME | | | 2.2 NAME | | | |
| STREET ADDRESS | | | 2.3 STREET | ADDRESS | S V | |
| CITY-ST-ZIP | | | 2.4 CITY-5 | ST-ZIP | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | S Change J Addition | |
| NAME | | | 3.2 NAME | | GOLD, KAREN B | |
| STREET ADDRESS | | | 3.3 STREET | i | | |
| CITY-ST-ZIP | <u> </u> | | 3.4. C/TY-5 | 31 - ZIP | Ponte Vedra Beach FL. | |
| TITLE | | ☐ DELETE | 4 1 TITLE 4.2 NAME | | D GOLD, KOSSETT D | |
| NAME | | | | IDDOCOD | 25430 Oaks Blvd | |
| STREET ADDRESS | | | 43 STREET | | Land Of Lakes FL | |
| CITY-ST-ZIP TITLE | | ☐ DELETE | 44 CITY-S 51 TITLE | 1-218 | D Change Addition | |
| NAME | | | 52 NAME | | BELL, JR. CLIFTON A | |
| STREET ADDRESS | | | 53 STREET | ADDRESS | 11000 000 000 000 000 | |
| CITY-ST-ZIP | | i | 54 CITY-S | | Ocala, FL | |
| TITLE | | ☐ DELETE | 61 TITLE | | Change Addition | |
| NAME | | | 62 NAME | | | |
| STREET ADDRESS | | | 63 STREET | ADDRESS | à | |
| CITY-ST-ZIP | | | 64 CITY-S | | | |
| 14 I hereby c | 14. Thereby cartify that the information supplied with this filing does not quality 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 director of the corporation or the receiver or true empowered to execute his feport as required by Chapter 607, Florida Statutes, and that my name appears in | | | | | |
| officer or director of the corporation or the receiver or trustee empowered to execute his feport as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. | | | | | | |