## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P96000048989 Apr 18, 2000 8:00 am Secretary of State GOLDEN BEAR GOLF, INC. 04-18-2000 90810 001 \*\*\*450.00 Principal Place of Business Mailing Address 11780 U.S. HIGHWAY ONE 11780 U.S. HIGHWAY ONE SHITE 400 SUITE 400 NORTH PALM BEACH FL 33408-3007 NORTH PALM BEACH FL 33408-3042 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 65-0680880 Not Applicable Zip Zip Country \$8.75 Additional Country 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** Street Address (P.O. Box Number is Not Acceptable) 11780 U.S. HIGHWAY ONE #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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CD ☐ Addition ☐ Delete TIT! F TITLE NICKLAUS, JACK W NAME NAME STREET ADDRESS 11780 U.S. HIGHWAY ONE #400 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NORTH PALM BEACH FL 33408 Change ☐ Addition ☐ Delete TITLE TITLE MCGOVERN, JOHN F NAME NAME STREET ADDRESS STREET ADDRESS 11780 U.S. HIGHWAY ONE, #400 CITY-ST-ZIP CITY-ST-ZIP N PALM BCH FL 33408 SVPS ---- Change -- Addition Delete TITLE TITLE WINSLETT, STEPHEN S NAME STREET ADDRESS STREET ADDRESS 11780 U.S. HIGHWAY ONE CITY-ST-ZIP CITY-ST-ZIP NORTH PALM BEACH FL 33408-3007 ☐ Addition ☐ Delete TITLE ☐ Change CHAPDELAINE, RICHARD F NAME NAME 11780 US HWY ONE #400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP N PALM BCH FL 33408 ☐ Change ■ Addition Delete TITLE TITLE BIRK, ROGER E NAME NAME STREET ADDRESS STREET ADDRESS 11780 US HWY ONE #400 CITY-ST-ZIP CITY-ST-ZIP N PALM BCH FL 33408 Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 or supplemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STEPHEN S. WINSLETT.

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

SIGNATURE: