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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000085455

1. Corporation Name

GOLDEN BEAR PROPERTIES, INC.

Principal	Place of	f Busi	ness

Mailing Address

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90067 036 ***150.00



	SHWAY ONE STE. 300 11780 U.S. HIGHWAY ONE STE. 300 BEACH FL 33408 NORTH PALM BEACH FL 33408		DO NOT WRITE IN THIS SPACE					
	· ·				3. Date Incorporated or Qualifed 10/02/1997			
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		A	pplied For
21	<u>:</u>	26			65-0806897	<u>.</u>	N	ot Applicable
Suite, Apt. #	¥, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional
22	entered to the second section of	27			5. Certificate of Status Desired	<u> </u>	Fee R	lequired *
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
23	-	28			Trust Fund Contribution	<u> </u>	Added	to Fees
Zip	Country	Zip	Countr	,	8. This corporation owes the curre	nt year Inta	ngible	
24	25	29 3	30		Personal Property Tax		☐ Yes	□No
-	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered A	gent	
			81	Name				ſ
FHS	CORPORATE SERVICES, INC.		00	Direct A	ddeen (D.O. Boy Number in Not Acceptate	\(\alpha\)		
11780 U.S. HIGHWAY ONE STE. 300		84	82 Street Address (P.O. Box Number is Not Acceptable)					
NOR	TH PALM BEACH FL 33408		83	 			···	
	•			<u> </u>				
			84	City		FL	85 Zip	Code
<u>-</u>		0.000 000 000 000		<u>, </u>	corporation submits this statement for the p	. –	hanging it	s registered
SIGNATURE	n familiar with, and accept the obligations of registered ager				quired when reinstating)	DATE		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AN	DIRECT	ORS IN 12
TITLE	CEOD	DELETE	1.1 TITLE				Change	Addition Addition
NAME	NICKLAUS, JACK W		1.2 NAME	1	•			į
STREET ADDRESS	11780 U.S. HIGHWAY ONE S	TE. 300	1.3 STREE	T ADDRESS		•		l
1	NORTH PALM BEACH FL 3340		1.4 CITY-		· · · · · · · · · · · · · · · · · · ·			
CITY-ST-ZIP TITLE	P	DELETE	2.1 TITLE	<i></i>			☐ Change	☐ Addition
ļ	FENTON, IRA		2.2 NAME	J	•			· J
NAME	11780 U.S. HIGHWAY ONE S	TE 200	1	TADDDEEC	•			
STREET ADDRESS				TADDRESS	•			## TE 1 ###
CITY-ST-ZIP	NORTH PALM BEACH FL 3340	F DELETE	2.4 CITY-	SI-ZIP			Change	☐ Addition
··· (DELLINOED DIQUIARDA	□ NETC+6	3.1 TITLE	}				
NAME .	BELLINGER, RICHARD P	20 -200	3.2 NAME	ķ	•			Ì
STREET ADDRESS	11780 U.S. HIGHWAY ONE - S		3.3 STREE	TADDRESS	·			ĺ
CITY-ST-ZIP	NORTH-PALM BEACH FL 3340	·- 	3.4. CiTY-	ST-ZIP		 _	C) Change	Addition
TITLE	ST	☐ DELETE	4.1 TITLE				Change	, Magada
NAME	BATES, JACK P	** ***	, 4. 2 NAME	[•			ì
STREET ADDRESS	11780 U.S. HIGHWAY ONE S		4.3 STREE	T ADORESS				
CITY-ST-ZIP	NORTH PALM BEACH FL 3340		4.4 CITY-	ST-ZIP			<u> </u>	F=1 A 1.000
TITLE		☐ DELETE	5.1 TITLE				Change	Addition
NAME (5.2 NAME					
STREET ADDRESS			5.3 STREE	ET ADDRESS				
CITY-ST-ZIP			5.4 CITY-					
TITLE		☐ DELETE	6.1 TITLE				☐ Change	Addition
NAME			6.2 NAME					ļ
STREET ADDRESS	•		6.3 STREE	TADDRESS	•			Ì
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	•			

14. 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 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 trustee empowered to execute this report 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, with all other like empowered.

SIGNATURE: