

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000034974

1. Entity Name  
GOLDEN B, INC.

Principal Place of Business  
% MORTGAGE CENTER OF NAPLES  
26511 CLARKSTON DR  
BONITA SPRINGS FL 34135

Mailing Address  
% MORTGAGE CENTER OF NAPLES  
26511 CLARKSTON DR  
BONITA SPRINGS FL 34135

2. Principal Place of Business  
18570 DEEP PASSAGE LN.  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
FT. MYERS BEACH  
Zip  
33931  
Country

City & State  
Zip  
Country

4. FEI Number 65-0900975

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

WEYERS, JUERGEN  
26511 CLARKSTON DRIVE  
BONITA SPRINGS FL 34135

## 7. Name and Address of New Registered Agent

Name WEYERS, JUERGEN

Street Address (P.O. Box Number is Not Acceptable)

18570 DEEP PASSAGE LN.

City FT. MYERS BEACH FL Zip Code 33931

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 JUERGEN WEYERS  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

01/05/00

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election, Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE PSTD  
NAME WEYERS, JUERGEN  
STREET ADDRESS 4419 DEL PRADO BLVD 6  
CITY-ST-ZIP CAPE CORAL FL 3394 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD  
NAME WEYERS, JUERGEN  
STREET ADDRESS 18570 DEEP PASSAGE LN  
CITY-ST-ZIP FT. MYERS BEACH FL 33931 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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.

SIGNATURE: JUERGEN WEYERS  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/05/00  
Date

941-273-3889  
Daytime Phone #

FILED  
Jan 22, 2001 8:00 am  
Secretary of State

01-22-2001 90140 028 \*\*\*150.00

00007623



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)