



2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90369 034 ****50.00

DOCUMENT # L05000071604			
1. Entity Name WORKING BEAR, LLC			
Principal Place of Business 430 NORTH G STREET LAKE WORTH, FL 33460		Mailing Address 430 NORTH G STREET LAKE WORTH, FL-33460	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 1281 Georgia Rd PMB 453	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State Franklin NC	
Zip	Country	Zip 28734	Country USA
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ELK, SCOTT 4800 N. FEDERAL HIGHWAY SANCTUARY CENTRE, STE. 200E BOCA RATON, FL 33431		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	FL 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE		DATE	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WOUDE, JAMES VanderWoude, James <input type="checkbox"/> Delete 1281 GEORGIO RD PMB 453 FRANKLIN, NC 28734	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Same person Last Name is VanderWoude
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: 		JAMES VANDERWOUDE 4-18-07 8283696341	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	