# 2008 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**
**Oct 28, 2008**
**Secretary of State**

DOCUMENT# V70088

**Entity Name:** S. BEARS, INC.

**Current Principal Place of Business:**

1281 GULF OF MEXICO DR.
#402
LONGBOAT KEY, FL 34228

**New Principal Place of Business:**

**Current Mailing Address:**

80 SO 80TH STREET
SUITE 4900
MINNEAPOLIS, MN 55403

**New Mailing Address:**

**FEI Number: 65-0353965** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MACKSEY, TIMOTHY P
2521 WATERVIEW CT.
SARASOTA, FL 34231 US

**Name and Address of New Registered Agent:**

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: TIMOTHY P MACKSEY
Electronic Signature of Registered Agent — Date

**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: MOORE, THOMAS A
Address: 166 CHERRY HILL
City-St-Zip: PRINCETON, NJ 08540

Title: V ( ) Delete
Name: THOMPSON, JAMES W
Address: 7434 JAGER COURT
City-St-Zip: CINCINNATI, OH 45230

Title: S/T ( ) Delete
Name: LILLY, JOHN N
Address: 3655 NORTHOME RD
City-St-Zip: WAYZATA, MN 55391

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN LILLY OWNE 10/28/2008
Electronic Signature of Signing Officer or Director — Date