2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008589

FILED Jun 19, 2006 Secretary of State

Entity Name: THE BEARS OF SOUTH FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 1170 NORTH FEDERAL HIGHWAY #401 FORT LAUDERDALE, FL 333041401 **New Mailing Address: Current Mailing Address:** P.O. BOX 24171 P.O. BOX 24171 FORT LAUDERDALE, FL 33307 FORT LAUDERDALE, FL 33307 FEI Number: 73-1649668 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WARD, WILLIAM R 1170 NORTH FEDERAL HIGHWAY #401 FORT LAUDERDALE, FL 333041401 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition EUGENE, MAHONEY WILLIAM R., WARD Name: Name: 837 NE 16TH AVENUE UNIT 1 Address: 1170 N FEDERAL HIGHWAY #401 Address: City-St-Zip: FORT LAUDERDALE, FL 33304 City-St-Zip: FORT LAUDERDALE, FL 33304 Title: VD (X) Delete Title: () Change () Addition MARTINEZ, GUY Name: Name: Address: 5210 NW 22ND AVENUE Address: City-St-Zip: OAKLAND PARK, FL 33309 City-St-Zip: Title: () Delete Title: () Change () Addition SCOTT, JOE Name: Name: 401 SE 18TH COURT #6 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33316 City-St-Zip: Title: TD () Delete Title: () Change () Addition GREENE, RANDY Name: Name: 172 ORANGE DRIVE Address: Address: City-St-Zip: BOYNTON BEACH, FL 33436 City-St-Zip: Title: (X) Delete Title: () Change () Addition WARD, WILLIAM R Name: Name: 1170 N FEDERAL HIGHWAY #401 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33304 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM R. WARD PD 06/19/2006