

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008589

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: THE BEARS OF SOUTH FLORIDA, INC.

## Current Principal Place of Business:

1170 NORTH FEDERAL HIGHWAY  
#401  
FORT LAUDERDALE, FL 333041401

## New Principal Place of Business:

## Current Mailing Address:

1170 NORTH FEDERAL HIGHWAY  
#401  
FORT LAUDERDALE, FL 33304

## New Mailing Address:

1170 NORTH FEDERAL HIGHWAY  
#401  
FORT LAUDERDALE, FL 333041401

FEI Number: 73-1649668

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WARD, WILLIAM R  
1170 NORTH FEDERAL HIGHWAY  
#401  
FORT LAUDERDALE, FL 333041401 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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WARD, WILLIAM R  
Address: 1170 N FEDERAL HIGHWAY #401  
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: T ( ) Delete  
Name: SCOTT, JOSEPH  
Address: 401 SE 18TH COURT #6  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D ( ) Delete  
Name: DALE, RUSSELL  
Address: 2408 NW 6TH TERRACE  
City-St-Zip: WILSON MANORS, FL 33311

Title: S (X) Delete  
Name: KRAMP, JIMMY D  
Address: 115 SOUTH C STREET #204  
City-St-Zip: LAKE WORTH, FL 33460

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: WARD, WILLIAM R  
Address: 1170 N FEDERAL HIGHWAY #401  
City-St-Zip: FORT LAUDERDALE, FL 33304

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

Title: S (X) Change ( ) Addition  
Name: DALE, RUSSELL  
Address: 2408 NW 6TH TERRACE  
City-St-Zip: WILSON MANORS, FL 33311

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 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

VP

01/23/2009

Electronic Signature of Signing Officer or Director

Date