

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000011319

**Entity Name:** BEAR WARRIORS UNITED, INC.

**Current Principal Place of Business:**

1133 COVINGTON STREET  
OVIEDO, FL 32765

**Current Mailing Address:**

P. O. BOX 622621  
OVIEDO, FL 32762-2621 US

**FEI Number: 82-0985009**

**Certificate of Status Desired: No**

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

BLACKNER, LESLEY  
123 AUSTRALIAN AVENUE  
PALM BEACH, FL 33480 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

**Officer/Director Detail :**

Title EXECUTIVE DIRECTOR  
Name SHADIX, KATRINA  
Address 1133 COVINGTON STREET  
City-State-Zip: OVIEDO FL 32765

Title TREASURER  
Name HUGHES, PATRICIA  
Address 3013 EAST BEAUMONT LANE  
City-State-Zip: EUSTIS FL 32726

Title BD  
Name MEAGHER, MAUREEN  
Address 44 ROYAL TRAILS LANE  
City-State-Zip: EUSTIS FL 32736

Title S  
Name WILLIAMS, MYRA  
Address 102 NATHAN LOOP  
City-State-Zip: TWIN CITY GA 30471

Title BD  
Name MEYERS, STEVEN  
Address 1105 E. CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

*I hereby 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 all other like empowered.*

**SIGNATURE: KATRINA SHADIX**

**EXECUTIVE DIRECTOR**

**06/14/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date