


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90087 021 ***158.75

DOCUMENT # H08696	
1. Entity Name YEAGERBEAR ENTERPRISES, INC.	

Principal Place of Business % BARRE J. YEAGER 1901 SOUTH TAMiami TRAIL, SUITE 0 VENICE, FL 34293 4411 BEE RIDGE RD #503, SARASOTA, FL 34233	Mailing Address % BARRE J. YEAGER 4411 BEE RIDGE RD. #503 SARASOTA, FL 34233
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04212005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2428282	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent YEAGER, BARRE J. 4901 SOUTH TAMiami TRAIL 4411 BEE RIDGE RD #503 SUITE 0 VENICE, FL 34293 SARASOTA, FL 34233

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP YEAGER, BARRE J 4411 BEE RIDGE RD #503 1901 S. TAMiami TRAIL VENICE, FL 34293 SARASOTA, FL 34233
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BARRE J. YEAGER

x 4/26/05 x 941 780-8676
Date Daytime Phone #