

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000086201

FILED  
Mar 01, 2009  
Secretary of State

Entity Name: THREE CUB BEAR, L.L.C.

**Current Principal Place of Business:**

24470 NE 133 PLACE ROAD  
SALT SPRINGS, FL 32134

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5221  
SALT SPRINGS, FL 32134

**New Mailing Address:**

FEI Number: 20-3489925

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHNEIDER, JOAN A  
24470 NE 133 PLACE ROAD  
SALT SPRINGS, FL 32134 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SCHNEIDER, JOAN A  
Address: 24470 NE 133 PLACE ROAD  
City-St-Zip: SALT SPRINGS, FL 32134

Title: MGRM ( ) Delete  
Name: GIFFIN, MICHAEL J  
Address: 14531 NE 190TH LANE  
City-St-Zip: SALT SPRINGS, FL 32134

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: GIFFIN, SHARON  
Address: 14531 NE 190TH LANE  
City-St-Zip: SALT SPRINGS, FL 32134

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOAN A. SCHNEIDER

MGRM

03/01/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date