

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000001247		
1. Entity Name A BEARS EYE VIEW, LLC		

FILED

07 SEP 17 PM 2:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 1010 NE 8TH AVENUE #10 DELRAY BEACH, FL 33483 US	Mailing Address 1010 NE 8TH AVENUE #10 DELRAY BEACH, FL 33483 US
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2. Principal Place of Business - No P.O. Box # 2951 San Remo Way Suite, Apt. #, etc.	3. Mailing Address 2951 San Remo Way Suite, Apt. #, etc.
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09132007 Chg-LLC CR2E083 (12/06)

City & State Delray Beach, FL	City & State Delray Beach, FL	4. FEI Number 20-4114532	Applied For Not Applicable
Zip 33445	Country US	Zip 33445	Country US

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent SURBER, MELANIE D 1010 NE 8TH AVE. #10 DELRAY BEACH, FL 33483		7. Name and Address of New Registered Agent Name Melanie D. Surber Street Address (P.O. Box Number is Not Acceptable) 2951 San Remo Way City Delray Beach FL Zip Code 33445	
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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 name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9-13-07

DATE

Filing Fee is \$50.00
Due by September 14, 2007

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SURBER, TODD E 1010 NE 8TH AVENUE, #10 DELRAY BEACH, FL 33483 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2951 San Remo Way Delray Beach, FL 33445 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MACIASZEK, DARIN 2397 MORTON ROAD NORTH PORT, FL 34286 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	300109765193 09/21/07--01044--003 **50.00 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FAGIANI, DANIEL 2430 GRANDVIEW DR NORTH PORT, FL 34286 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SURBER, MELANIE D 1010 NE 8TH AVE, #10 DELRAY BEACH, FL 33483 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2951 San Remo Way Delray Beach, FL 33445 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FAGIANI, VICKI 2430 GRANDVIEW DRIVE NORTH PORT, FL 34286 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Todd E. Surber

9/13/07 (561)368-3337

Date Daytime Phone #