## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000001247

Entity Name: A BEARS EYE VIEW, LLC

2430 GRANDVIEW DRIVE

NORTH PORT, FL 34286 US

Address:

City-St-Zip:

FILED Apr 22, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2951 SAN REMO WAY DELRAY BEACH, FL 33445 US **Current Mailing Address: New Mailing Address:** 2951 SAN REMO WAY DELRAY BEACH, FL 33445 US FEI Number: 20-4114532 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SURBER, MELANIE D 2951 SAN REMO WAY DELRAY BEACH, FL 33445 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SURBER, TODD E Name: Name: 2951 SAN REMO WAY Address: Address: City-St-Zip: DELRAY BEACH, FL 33445 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MACIASZEK, DARIN Name: Address: 2397 MORTON ROAD Address: City-St-Zip: NORTH PORT, FL 34286 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition FAGIANI, DANIEL Name: Name: 2430 GRANDVIEW DR Address: Address: City-St-Zip: NORTH PORT, FL 34286 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: SURBER, MELANIE D Name: Address: 2951 SAN REMO WAY Address: City-St-Zip: DELRAY BEACH, FL 33445 US City-St-Zip: MGRM Title: ( ) Delete Title: () Change () Addition FAGIANI, VICKI Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: TODD SURBER MGRM 04/22/2009