

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000001247

Entity Name: A BEARS EYE VIEW, LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2951 SAN REMO WAY  
DELRAY BEACH, FL 33445 US

**New Principal Place of Business:**

**Current Mailing Address:**

2951 SAN REMO WAY  
DELRAY BEACH, FL 33445 US

**New Mailing Address:**

FEI Number: 20-4114532

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SURBER, MELANIE D  
2951 SAN REMO WAY  
DELRAY BEACH, FL 33445 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  
Name: SURBER, TODD E  
Address: 2951 SAN REMO WAY  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: MGRM  
Name: MACIASZEK, DARIN  
Address: 2397 MORTON ROAD  
City-St-Zip: NORTH PORT, FL 34286 US

Title: MGRM  
Name: FAGIANI, DANIEL  
Address: 2430 GRANDVIEW DR  
City-St-Zip: NORTH PORT, FL 34286 US

Title: MGRM  
Name: SURBER, MELANIE D  
Address: 2951 SAN REMO WAY  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: MGRM  
Name: FAGIANI, VICKI  
Address: 2430 GRANDVIEW DRIVE  
City-St-Zip: NORTH PORT, FL 34286 US

I hereby 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: TODD SURBER

MGRM

04/30/2012

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