

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000120429

Entity Name: BEAR PAW CABINS, LLC

FILED  
Apr 16, 2007  
Secretary of State

**Current Principal Place of Business:**

401 POSADAS CIRCLE  
PUNTA GORDA, FL 33983

**New Principal Place of Business:**

**Current Mailing Address:**

401 POSADAS CIRCLE  
PUNTA GORDA, FL 33983

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

PREWETT, DANIEL L  
5777 BENEVA RD.  
SARASOTA, FL 34233 US

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

SCHNELL, MARY ANN  
401 POSADAS CIRCLE  
PUNTA GORDA, FL 33983 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: MARY ANN SCHNELL

04/16/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SCHNELL, LAWRENCE  
Address: 401 POSADAS CIRCLE  
City-St-Zip: PUNTA GORDA, FL 33983

Title: MGRM ( ) Delete  
Name: SCHNELL, MARY ANN  
Address: 401 POSADAS CIRCLE  
City-St-Zip: PUNTA GORDA, FL 33983

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY ANN SCHNELL

MGRM

04/16/2007

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