

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007893

FILED
May 01, 2006
Secretary of State

Entity Name: BACKWOODS BEARS CLUB, INC.

Current Principal Place of Business:

21710 US HWY 98
DADE CITY, FL 33523

New Principal Place of Business:

Current Mailing Address:

11471 BELVA ROAD
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 27-0036696 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HESTER, SHERMAN M JR
11471 BELVA ROAD
JACKSONVILLE, FL 32218 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HESTER, SHERMAN M HESTER
Address: 11471 BELVA ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: V () Delete
Name: UHL, JON
Address: 21710 US HWY 98
City-St-Zip: DADE CITY, FL 33523

Title: T () Delete
Name: GOODRICH, JIM
Address: 1337 HUBBARD STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: S () Delete
Name: MARBELL, BARBARA
Address: 21710 US HWY 98
City-St-Zip: DADE CITY, FL 33523

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HESTER, SHERMAN M PRSIDEN
Address: 11471 BELVA ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: V (X) Change () Addition
Name: JAWORSKI, GARY J VICE PR
Address: POST OFFICE BOX 2331
City-St-Zip: DADE CITY, FL 33526

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

Title: S (X) Change () Addition
Name: MULLENIX, JOSEPH E
Address: P.O. BOX 2231
City-St-Zip: DADE CITY, FL 33526

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERMAN M. HESTER JR.

P

05/01/2006

Electronic Signature of Signing Officer or Director

Date