

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007893

FILED  
Apr 29, 2008  
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 ( )

## Name and Address of Current Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SCOTT, CHARLES PRSIDENT  
Address: 425 PARKVIEW DRIVE  
City-St-Zip: SARASOTA, FL 34243

Title: V ( ) Delete  
Name: JENNINGS, ROBERT VICE PR  
Address: 1291 CR LOT 7  
City-St-Zip: LAKE PANASOFFKEE, FL 33538

Title: T ( ) Delete  
Name: GOODRICH, JIM  
Address: 11471 BELVA ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: CS ( ) Delete  
Name: DIETRICH, BYRAN  
Address: 402 SW 39TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33914

Title: RS ( ) Delete  
Name: DIETRICH, CHIP  
Address: 402 SW 39TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33914

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition  
Name: HESTER, SHERMAN VICE PR  
Address: 1337 HUBBARD STREET  
City-St-Zip: JACKSONVILLE, FL 32206

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

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 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

V

04/29/2008

Electronic Signature of Signing Officer or Director

Date