

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000009963

FILED
Feb 07, 2011
Secretary of State

Entity Name: BEARS WHO CARE, INCORPORATED

Current Principal Place of Business:

555 CAMPUS STREET
CELEBRATION, FL 34747

New Principal Place of Business:

Current Mailing Address:

555 CAMPUS STREET
CELEBRATION, FL 34747

New Mailing Address:

FEI Number: 27-1277339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: DP
Name: SCHMITZ, KARI
Address: 555 CAMPUS STREET
City-St-Zip: CELEBRATION, FL 34747

Title: DVP
Name: SCHMITZ, TAD
Address: 555 CAMPUS STREET
City-St-Zip: CELEBRATION, FL 34747

Title: D
Name: SCHMITZ, JOSEPH
Address: 413 EDGEWATER DR
City-St-Zip: MORRIS, IL 60450

I hereby 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 all other like empowered.

SIGNATURE: KARI K SCHMITZ

DP

02/07/2011

Electronic Signature of Signing Officer or Director

Date