2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2008 8:00 am Secretary of State

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DOCUMENT # N18257 1. Entity Name BEAR'S PAW VILLAS SEVEN ASSOCIATION, INC.						04-17-2008					
Principal Place 6312 TRAIL I NAPLES, FL	BLVD	PO B	g Address OX 770278 ES, FL 34107	IS	;			101 91911 B1311 9151			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03192008	Chg-NP	CR2E03	7 (12/06)			
City & State		City & State				4. FEI Numbe 59-2705			<u> </u>	plied For t Applicable	
Zip	Country	Zìp		Cou	ntry	5. Certificate	of Status Desired		\$8.75 Add Fee Required		
	6. Name and Address of Current	t Registere	d Agent			7. Name and	Address of New	Registered A	Agent		
LIVELY, DENNIS F				Name							
6312 TRAI						Street Address (P.O. Box Number is Not Acceptable)					
NAPLES, F	FL 34108				City			FL	Zip Code	e	
	named entity submits this statement fi	for the purp	ose of changing its re	gistere	ed office or regis	stered agent, or bott	n, in the State of		amiliar with,	and accept	
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100										· - -	
SIGNATURE.	Signature, typed or printed name of registered agen	nt and title if app	licable. (NOTE: F	Registered	1 Agent signature req	jured when reinstating)		DATE			
	Signature, typed or printed name of registered ager	nt and title if app	9. Election Camp	aign Fi	inancing	tured when reinstating)		Make check			
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other tike empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/08/08 239-591-4200