

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000002352

FILED
Feb 11, 2005
Secretary of State

Entity Name: THE BEARS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1450 JULIO LN
ORLANDO, FL 32807

New Principal Place of Business:

6601 HILL TOP ROAD
ORLANDO, FL 32810

Current Mailing Address:

THE BEARS OF CENTRAL FLORIDA
PO BOX 647
ORLANDO, FL 328020647

New Mailing Address:

FEI Number: 59-3468559 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DEANE, WILLIAM
1450 JULIO LN
ORLANDO, FL 32807 US

Name and Address of New Registered Agent:

TIM, MOBLEY
6601 HILL TOP ROAD
ORLANDO, FL 32810 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: TIM MOBLEY

02/11/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: DEANE, WILLIAM
Address: 1450 JULIO RD
City-St-Zip: ORLANDO, FL 32807

Title: D () Delete
Name: FORD-HAYES, CHRIS
Address: 1434 MICHIGAN AVE
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: BROCKMAN, JOHN
Address: 910 HILL TOP RD
City-St-Zip: ORLANDO, FL 32812

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: FORD, JOHN
Address: 2908 KARANDA ST.
City-St-Zip: TITUSVILLE, FL 32796

Title: VP (X) Change () Addition
Name: BIEHL, DAVID
Address: 3467 FOXCROFT CIRCLE
City-St-Zip: OVIEDO, FL 32765

Title: SEC (X) Change () Addition
Name: FORD-HAYES, CHRIS
Address: 1434 MICHIGAN AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: TREA () Change (X) Addition
Name: MOBLEY, TIM
Address: 6601 HILL TOP ROAD
City-St-Zip: ORLANDO, FL 32810

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIM MOBLEY

TREA

02/11/2005

Electronic Signature of Signing Officer or Director

Date