

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002352

FILED
Feb 05, 2007
Secretary of State

Entity Name: THE BEARS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

3904 CORRINE DRIVE
ORLANDO, FL 32803

New Principal Place of Business:

3904 CORRINE DR
ORLANDO, FL 32803 US

Current Mailing Address:

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

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:

MOORE, WILLIAM A TRES
3904 CORRINE DRIVE
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

MOORE, WILLIAM A
3904 CORRINE DRIVE
ORLANDO, FL 32803 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: WILLIAM A MOORE

02/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: LICKTEIG, BRETT M PRES
Address: 3904 CORRINE DR
City-St-Zip: ORLANDO, FL 32803

Title: VP () Delete
Name: SHIPMAN, SCOTT V PRES
Address: 7937 BIRMAN ST
City-St-Zip: MAITLAND, FL 32751

Title: SEC () Delete
Name: TURNER, LORAN SEC
Address: 11145 DORY CT
City-St-Zip: ORLANDO, FL 32837

Title: TRES () Delete
Name: MOORE, WILLIAM A TRES
Address: 3904 CORRINE DR
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LICKTEIG, BRETT M
Address: 3904 CORRINE DR
City-St-Zip: ORLANDO, FL 32803

Title: VP (X) Change () Addition
Name: RICE, JIMMIE VIRGIL
Address: 3819 MARTIN ST
City-St-Zip: ORLANDO, FL 32806

Title: SEC (X) Change () Addition
Name: LIMBACH, TIM
Address: PO BOX 4352
City-St-Zip: WINTER PARK, FL 32793

Title: TRES (X) Change () Addition
Name: MOORE, WILLIAM A
Address: 3904 CORRINE DR
City-St-Zip: ORLANDO, FL 32803

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: WILLIAM A MOORE

TRES

02/05/2007

Electronic Signature of Signing Officer or Director

Date