2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002352

Entity Name: THE BEARS OF CENTRAL FLORIDA, INC.

FILED Feb 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3904 CORRINE DR 690 CECINA WAY

ORLANDO, FL 32803 US APT H

KISSIMMEE, FL 34741 US

Current Mailing Address: New Mailing Address:

P O BOX 647

ORLANDO, FL 328020647 US

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RICE, JIMMIE V JR GAHRIS, GREG A 3819 MARTIN ST 690 CECINA WAY

ORLANDO, FL 32806 US H
KISSIMMEE, FL 34741 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: GREG A GAHRIS 02/19/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

e: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 RICE, JIMMIE VIRGIL
 Name:
 LIMBACH, TIM

 Address:
 3819 MARTIN ST
 Address:
 690 CECINA WAY APT H

 City-St-Zip:
 ORLANDO, FL 32806
 City-St-Zip:
 KISSIMMEE, FL 34741

Title: VP () Delete Title: VP (X) Change () Addition Name: MEURER, MARK Name: BEVERY, JAMIE

Address: 519 N RIO GRAND AVE Address: 940 PARKLAKE CIRCLE City-St-Zip: ORLANDO, FL 32805 City-St-Zip: MAITLAND, FL 32751

Title: SEC () Delete Title: SEC (X) Change () Addition

 Name:
 LIMBACH, TIM
 Name:
 GAHRIS, GREG

 Address:
 690 CECINA WAY
 Address:
 690 CECINA WAY

 City-St-Zip:
 KISSIMMEE, FL 34741
 City-St-Zip:
 KISSIMMEE, FL 34741

Title: TRES () Delete Title: TRES (X) Change () Addition

 Name:
 MOORE, WILLIAM A
 Name:
 DOUGLAS, BOBBIE

 Address:
 3904 CORRINE DR
 Address:
 6153 LOKEY DR

 City-St-Zip:
 ORLANDO, FL 32803
 City-St-Zip:
 ORLANDO, FL 32810

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: GREG GAHRIS SEC 02/19/2009