

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90151 013 ***150.00

DOCUMENT # **P000000103840**
1. Entity Name **ALMOST BEAR, INC** ✓

DO NOT WRITE IN THIS SPACE

642238

2. Principal Place of Business
4713 FORT KNOX COURT
Suite, Apt. #, etc.

3. Mailing Address
4713 FORT KNOX COURT
Suite, Apt. #, etc.

City & State
ORLANDO, FL.

City & State
ORLANDO, FL

4. FEI Number
59-3680855

Applied For
Not Applicable

Zip
32822

Country
U.S.A.

Zip
32822

Country
U.S.A.

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Sylvia J. MAY

Street Address (P.O. Box Number is Not Acceptable)

9809 BUCKHEAD COURT

City
WINDERMERE

FL

Zip Code
34786

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**(P) SYLVIA J. MAY
9809 BUCKHEAD COURT
WINDERMERE, FL. 34786**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**(T/S) ANITA W. FERRERA
4713 FORT KNOX COURT
ORLANDO, FL. 32822**

TITLE
NAME
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CITY - ST - ZIP

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: **Sylvia J. May (Sylvia J. MAY)**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/02
Date

407-909-3033
Daytime Phone #

CR2E034B (12/01)