


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000105508 1. Entity Name BEAR RUN INC.	
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Principal Place of Business 17333 PHEASANT CIRCLE PT. CHARLOTTE, FL 33948	Mailing Address 17333 PHEASANT CIRCLE PT. CHARLOTTE, FL 33948
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02142006 No Chg-P CR2E034 (11/05)

4. FEI Number 02-0646321	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent CASWELL, BARBARA I 17333 PHEASANT CIRCLE PT. CHARLOTTE, FL 33948
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**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

000000537839
05/03/06-80035-009 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CASWELL, BARBARA 17333 PHEASANT CIR. PORT CHARLOTTE, FL 33948
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 or trustee empowered to execute this report as required by Chapter 607, 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 like empowered.

SIGNATURE: Barbara I Caswell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/06 9417660054
Date Daytime Phone #