

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2002 8:00 am
Secretary of State

01-31-2002 90020 014 ***158.75

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DOCUMENT # P92000003214

1. Entity Name

RED BEAR CLOTHING, INC.

Principal Place of Business

**10433 OAKBROOK DR
TAMPA FL 33624**

Mailing Address

**10433 OAKBROOK DR
TAMPA FL 33624**

2. Principal Place of Business

4773 58th Avenue North

3. Mailing Address

4773 58th Avenue North

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

4. FEI Number

59-3157332

Applied For

Not Applicable

Zip

33714

Country

USA

Zip

33714

Country

USA

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MCMURTRY, RONALD A SR
10433 OAKBROOK DR
TAMPA FL 33624**

7. Name and Address of New Registered Agent

Name
James Kenneth Parker
Street Address (P.O. Box Number is Not Acceptable)
2200 Pinellas Point Drive South
City
St. Petersburg **FL** Zip Code
33712

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

James Kenneth Parker

1/15/2002

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)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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	D	<input checked="" type="checkbox"/> Delete
NAME	MCMURTRY, RONALD A	
STREET ADDRESS	10433 OAKBROOK DR	
CITY-ST-ZIP	TAMPA FL 33624	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	C/D/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	James Kenneth Parker	
STREET ADDRESS	2200 Pinellas Point Drive South	
CITY-ST-ZIP	St. Petersburg, FL 33712	
TITLE	D/T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	James C. Boule	
STREET ADDRESS	4195 14th Street, N.E.	
CITY-ST-ZIP	St. Petersburg, FL 33703	
TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	James J. Hubert, Sr.	
STREET ADDRESS	8308 Summerside Lane	
CITY-ST-ZIP	Port Richey, FL 34668	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Jan 15 2002 727522-1110

CR2E034 (9/01)