

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000009549

FILED
Dec 09, 2008
Secretary of State

Entity Name: ROBERT BEARS ENTERPRISES, INC.

Current Principal Place of Business:

1668 N HERCULES AVE
STE C
CLEARWATER, FL 33765

New Principal Place of Business:

Current Mailing Address:

1668 N HERCULES AVE
STE C
CLEARWATER, FL 33765

New Mailing Address:

FEI Number: 59-3361928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEARSE, RICHARD L JR
814 CHESTNUT STREET
CLEARWATER, FL 34616 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: BEARS, ROBERT R SR
Address: 120 TURTLE CREEK CR
City-St-Zip: OLDSMAR, FL

Title: D (X) Delete
Name: BEARS, ROBERT R JR
Address: 70 TURTLE CREEK CR
City-St-Zip: OLDSMAR, FL

Title: D () Delete
Name: EDELMANN, GARY
Address: 15510 FURLONG CIR
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT BEARS

D

12/09/2008

Electronic Signature of Signing Officer or Director

Date