

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000075629

1. Entity Name
BROWN BEAR PUBLISHING CO.



Principal Place of Business
**POST OFFICE BOX 92411
LAKELAND, FL 33805**

Mailing Address
**POST OFFICE BOX 92411
LAKELAND, FL 33805**



02152004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3405503

Applied For
☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BROWN, WALTER L.
337 VALLEJO COURT
LAKELAND, FL 33809**

**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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**U000000115255
04/16/04-80017-002 150.00**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**P
BROWN, WALTER L.
337 VALLEJO CT.
LAKELAND, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**VP
JACKSON, PHYLLIS S.
27391 SPRING ARBOR DR.
SOUTHFIELD, MI**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**SE
FENNICK, YVONNE
75 MCLEAN
HIGHLAND PARK, MI**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Walter L. Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

WALTER L. BROWN APRIL 14, 2004 863-815-1320