2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 22, 2004 8:00 am Secretary of State **DOCUMENT # P97000073761** 04-22-2004 90008 024 ***150.00 1. Entity Name BLACK BEAR PROPERTIES, INC. Principal Place of Business Mailing Address 1100011 7164 LYLE TERRACE., STE 4 7164 LYLE TERRACE., STE 4 FORT MYERS, FL 33907 FORT MYERS, FL 33907 Principal Place of Business 3. Mailing Address 13/80 N. Cleveland Ave 3/80 N. Cleveland 03232004 Chg-P CR2E034 (10/03) 4. £ELNumber Applied For Myers, FL 65-0794584 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Esposito ESPOSITO, PATRICK 7164 LYLE TERRACE., STE 4 FORT MYERS, FL 33907 Nyers 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. the obligations of registered agent Sposito. SIGNATURE. (NOTE: Registered Agent signature required when reinstating) nature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. PTD Patrick G. Esposito Strange Soute 130 13180 N. Cleveland Ave Delete TITLE Change ■ Addition EPOSITO, PATRICK G NAME NAME STREET ADDRESS 7164 LYLE TERRACE., STE 4 STREET ADDRESS ft.Myers, FL 33903 C(TY-S1-7)P CITY-ST-ZIP FORT MYERS, FL 33907 ☐ Delete chard Brad Thompson ■ Addition TITLE TITE F THOMPSON, RICHARD BRAD NAME Silverwood CT STREET ADDRESS 59 DOW AVE STREET ADDRESS CITY-ST-7/P Durham, MINEOLA, NY 11501 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 239 atros G. Er Patnik G. SIGNATURE:

FILED