

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000063289

FILED
Feb 20, 2002 8:00 AM
Secretary of State

Entity Name: BROWN BEAR, INC.

Current Principal Place of Business:

22043 US 19 N
CLEARWATER, FL 33765

Current Mailing Address:

22043 US 19 N
CLEARWATER, FL 33765

New Principal Place of Business:

14100 US 19 N
SUITE 124
CLEARWATER, FL 33764 PI

New Mailing Address:

14100 US 19 N
SUITE 124
CLEARWATER, FL 33765

FEI Number: 59-3525888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLOWERS, LAURA
14100 U.S. HWY 19 NORTH
SUITE 124
CLEARWATER, FL 33764 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FLOWERS, LAURA
Address: 22043 US 19 N
City-St-Zip: CLEARWATER, FL 33765

Title: D () Delete
Name: CHALACHE, LYNN
Address: 22043 US 19 N
City-St-Zip: CLEARWATER, FL 33765

Title: D () Delete
Name: TERRELL, JANE
Address: 22043 US 19 N
City-St-Zip: CLEARWATER, FL 33765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FLOWERS, LAURA
Address: 14100 US 19 N, SUITE 124
City-St-Zip: CLEARWATER, FL 33764

Title: D (X) Change () Addition
Name: CHALACHE, LYNN
Address: 14100 US 19 N, SUITE 124
City-St-Zip: CLEARWATER, FL 33764

Title: D (X) Change () Addition
Name: TERRELL, JANE
Address: 14100 US 19 N, SUITE 124
City-St-Zip: CLEARWATER, FL 33765

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LAURA FLOWERS

D

02/20/2002

Electronic Signature of Signing Officer or Director

Date