

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000081526

Entity Name: 3 BEARS ENTERPRISES, INC.

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

480 STATE RD. 13 N.
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

480 STATE ROAD 13N
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 62-1794354 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREER, WILLIAM
1830 AVONDALE CIRCLE
JACKSONVILLE, FL 32205 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HARRIS, ANGELA J
Address: 1830 AVONDALE CIRCLE
City-St-Zip: JACKSONVILLE, FL 32205

Title: S () Delete
Name: GREER, WILLIAM
Address: 1830 AVONDALE CIRCLE
City-St-Zip: JACKSONVILLE, FL 32205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: WILLIAM F. GREER

SECR

05/01/2006

Electronic Signature of Signing Officer or Director

_____ Date