

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S53400

FILED  
Aug 18, 2008  
Secretary of State

Entity Name: BEAR HUGS CHILD CARE CENTER, INC.

**Current Principal Place of Business:**

5045 N WICKHAM RD  
MELBOURNE, FL 329407131

**New Principal Place of Business:**

3000 S. FISKE BLVD  
ROCKLEDGE, FL 32955

**Current Mailing Address:**

3000 FISKE BLVD.  
ROCKLEDGE, FL 32955

**New Mailing Address:**

FEI Number: 59-3069736      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

LANG, BARRY  
5045 N WICKHAM RD  
MELBOURNE, FL 32935      US

**Name and Address of New Registered Agent:**

LANG, BARRY  
3000 S. FISKE BLVD  
ROCKLEDGE, FL 32955BARR US

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: \_\_\_\_\_ 08/18/2008  
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: PDST ( ) Delete  
Name: LANG, BARRY  
Address: 1317 HERITAGE ACRES BLVD  
City-St-Zip: ROCKLEDGE, FL 32955

Title: V ( ) Delete  
Name: LANG, DENISE  
Address: 1317 HERITAGE ACRES BLVD.  
City-St-Zip: ROCKLEDGE, FL

Title: CMV ( ) Delete  
Name: LANG, BARRY  
Address: 1317 HERITAGE ACRES BLVD  
City-St-Zip: ROCKLEDGE, FL 32955

**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: BARRY J LANG      P      08/18/2008  
Electronic Signature of Signing Officer or Director      Date