

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000081035

**FILED**  
**Jan 11, 2015**  
**Secretary of State**  
**CC3197085109**

**Entity Name:** FIVE BEARS MOUNTAIN VIEW LODGE, LLC

**Current Principal Place of Business:**

111 N.E. CHARLSTON OAKS DRIVE  
PORT ST. LUCIE, FL 34983

**Current Mailing Address:**

111 N.E. CHARLSTON OAKS DRIVE  
PORT ST. LUCIE, FL 34983 US

**FEI Number: 46-4643258**

**Certificate of Status Desired: No**

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

LOWRY, JOSEPH C  
111 N.E. CHARLSTON OAKS DRIVE  
PORT ST. LUCIE, FL 34983 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	LOWRY, JOSEPH C	Name	LOWRY, VICKI L
Address	111 N.E. CHARLSTON OAKS DRIVE	Address	111 N.E. CHARLSTON OAKS DRIVE
City-State-Zip:	PORT ST. LUCIE FL 34983	City-State-Zip:	PORT ST. LUCIE FL 34983

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JOSEPH C LOWRY**

**MGR**

**01/11/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date