

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 735821

FILED  
May 02, 2002 8:00 AM  
Secretary of State

**Entity Name:** BITS 'N PIECES PUPPET THEATRE, INC.

**Current Principal Place of Business:**

12908 TOM GALLAGHER RD  
DOVER, FL 33527 US

**New Principal Place of Business:**

**Current Mailing Address:**

12908 TOM GALLAGHER RD  
DOVER, FL 33527 US

**New Mailing Address:**

**FEI Number:** 59-1672609

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BICKEL, JERRY  
12904 TOM GALLAGHER RD.  
DOVER, FL 33527 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

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: ISAAC, BETSY,  
Address: 6201 TAMPA SHORES BLVD  
City-St-Zip: TAMPA, FL 00000,

Title: TD ( ) Delete  
Name: RUBIN, HOLLI,  
Address: 12904 TOMGALLAGHER ROAD  
City-St-Zip: DOVER, FL

Title: PD ( ) Delete  
Name: BICKEL, JERRY,  
Address: 12904 TOMGALLAGHER ROAD  
City-St-Zip: DOVER, FL

Title: SD ( ) Delete  
Name: SIMONS, TERRY L.,  
Address: 6932 GREENSHILL PLACE  
City-St-Zip: TAMPA, FL

Title: BD ( ) Delete  
Name: NELSON, RHONDA  
Address: 14108 WINSLOW PLACE  
City-St-Zip: TAMPA, FL 33624

Title: BD ( ) Delete  
Name: RADKE, KIMMIE  
Address: 2937 WINCHESTER  
City-St-Zip: TAMPA, FL

**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:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERRY BICKEL

PRES

05/02/2002

Electronic Signature of Signing Officer or Director

Date