

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000880

**FILED
Jul 13, 2004
Secretary of State**

Entity Name: GOLIATH AND BE-BE'S WORLD INC.

Current Principal Place of Business:

130 HILDEN ROAD
ST. AUGUSTINE, FL 32095

New Principal Place of Business:

Current Mailing Address:

130 HILDEN ROAD
ST. AUGUSTINE, FL 32095

New Mailing Address:

FEI Number: 59-3692174 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WOOLEY, NEDRA
130 HILDEN ROAD
ST. AUGUSTINE, FL 32095

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: D () Delete
Name: WOOLEY, NEDRA
Address: 130 HILDEN ROAD
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: D () Delete
Name: WOOLEG, KATHLEEN
Address: 420 PORONE POINT DRIVE
City-St-Zip: ST. AUGUSTINE, FL 320089

Title: D () Delete
Name: VELLY, SUSAN
Address: 701 A1A BCH BLVD
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: D () Delete
Name: CLADEK, LYDIA
Address: 5494 ATLANTIC VIEW
City-St-Zip: SAINT AUGUSTINE, FL 32080

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:

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: NEDRA WOOLEY

PRES

07/13/2004

Electronic Signature of Signing Officer or Director

Date