

.2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # 723850

1. Entity Name
BETA CENTER, INC.



Principal Place of Business
**4680 LAKE UNDERHILL ROAD
 ORLANDO, FL 32807**

Mailing Address
**4680 LAKE UNDERHILL ROAD
 ORLANDO, FL 32807**



01192006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **23-7446558** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**F & L CORP.
 ONE INDEPENDENT DRIVE
 SUITE 1300
 JACKSONVILLE, FL 32202**

**DO NOT WRITE
 IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
 Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD VAN HOECK, DOLLY 7604 APPLE TREE CIRCLE ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SWANSON, TRACY 8216 SARAGOZA COURT ORLANDO, FL 32836
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD EICHER, JOHN 25077 NORFOLK RD ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RIVETT, CHERIE 3500 PUTTER ST ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO KRAMER, HOPE 1540 GLENCOE RD WINTER PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP HUMMEL, KATHERINE J 1100 S ORLANDO AVE #408 MAITLAND, FL 32751

00000440103
 03/02/06-80027-019 61.25

**DO NOT WRITE
 IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **02-10-2006 (407) 277-1942**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #