

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Nov 05, 2009  
Secretary of State**

DOCUMENT# 723850

Entity Name: BETA CENTER, INC.

**Current Principal Place of Business:**4680 LAKE UNDERHILL ROAD  
ORLANDO, FL 32807**New Principal Place of Business:****Current Mailing Address:**4680 LAKE UNDERHILL ROAD  
ORLANDO, FL 32807**New Mailing Address:**

FEI Number: 23-7446558

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**F&L CORP.  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 322025017 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: CD ( ) Delete  
Name: RIVETT, CHERIE  
Address: 3500 PUTTER STREET  
City-St-Zip: ORLANDO, FL 32804Title: VPD ( ) Delete  
Name: HAWKINS, WALTER  
Address: 400 S ORANGE AVE., 6TH FLOOR  
City-St-Zip: ORLANDO, FL 32802Title: T ( ) Delete  
Name: HANNIGAN, ANDREW  
Address: 300 S INTERLACHEN AVE #404  
City-St-Zip: WINTER PARK, FL 32289Title: SD ( ) Delete  
Name: SOLIK, MARY D  
Address: 111 N. ORANGE AVE., SUITE 1800  
City-St-Zip: ORLANDO, FL 32801Title: PCEO ( ) Delete  
Name: KRAMER, HOPE  
Address: 1540 GLENCOE RD  
City-St-Zip: WINTER PARK, 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: PCEO (X) Change ( ) Addition  
Name: DOOLEY, TAMIKA  
Address: 839 LANCER CIRCLE  
City-St-Zip: OCOEE, FL 34761

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

SIGNATURE: TAMIKA DOOLEY

PCEO

11/05/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date