

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 24, 2006
Secretary of State**

DOCUMENT# F03000001731

Entity Name: BUILD-A-BEAR WORKSHOP FOUNDATION, INC.

Current Principal Place of Business:

1954 INNERBELT BUSINESS CENTER DR.
ST. LOUIS, MO 63114

New Principal Place of Business:

Current Mailing Address:

1954 INNERBELT BUSINESS CENTER DR.
ST. LOUIS, MO 63114

New Mailing Address:

FEI Number: 33-1007188 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CP () Delete
Name: CLARK, MAXINE
Address: 1954 INNERBELT BUSINESS CENTER DR.
City-St-Zip: ST. LOUIS, MO 63114

Title: DV () Delete
Name: ERDOS, BARRY
Address: 1954 INNERBELT BUSINESS CENTER DR.
City-St-Zip: ST. LOUIS, MO 63114

Title: DT () Delete
Name: KLOCKE, TINA
Address: 1954 INNERBELT BUSINESS CENTER DR.
City-St-Zip: ST. LOUIS, MO 63114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CLARK, MAXINE
Address: 1954 INNERBELT BUSINESS CENTER DR.
City-St-Zip: ST. LOUIS, MO 63114

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 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: TINA KLOCKE

DT

04/24/2006

Electronic Signature of Signing Officer or Director

Date