2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2005 8:00 am
Secretary of State
08-25-2005 90003 050 ****61.25

DOCUMENT # N01000000880
Entity Name
OLIATH AND BE-BE'S WORLD INC.

Principal Place of Business
30 HILDEN ROAD
ST. AUGUSTINE, FL 32095

Mailing Address
130 HILDEN ROAD
ST. AUGUSTINE, FL 32095

08082005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
1061 SW Alaska Way	4160 Tall Trees Ln
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Greenville FL	City & State: St Augustine FL
Zip: 32331 Country: USA	Zip: 32086 Country: USA

4. FEI Number: 59-3692174 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WOOLEY, NEDRA 130 HILDEN ROAD ST. AUGUSTINE, FL 32095	Name: Nedra Wooley Street Address (P.O. Box Number is Not Acceptable): 1061 SW Alaska Way City: Greenville FL Zip Code: 32331

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: Nedra Wooley Nedra Wooley 8/8/05
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when changing) DATE

Filing Fee is $61.25
Due by September 7, 2005

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WOOLEY, NEDRA 130 HILDEN ROAD ST. AUGUSTINE, FL 32095	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WOOLEG, KATHLEEN 420 PORONE POINT DRIVE ST. AUGUSTINE, FL 320089	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Alexandria Kulig 25319 Arbor Dr Ponte Vedra FL	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VELLY, SUSAN 701 A1A BCH BLVD SAINT AUGUSTINE, FL 32080	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Christy Leiro 825 Anastasia Blvd St Augustine FL 32080	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLADEK, LYDIA 5494 ATLANTIC VIEW SAINT AUGUSTINE, FL 32080	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Lisa Hoff 4160 Tall Trees lane St Augustine FL 32086	☐ Change ☐ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐

12. I hereby certify that the information supplied with this filing does not qualify 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Christy Leiro 8/8/05 904 829-5
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #