2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000242

Entity Name: THE BETH FOUNDATION, INC.

FILED Apr 12, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1166 SALT MARSH CIRCLE 2869 S. PONTE VEDRA BLVD. PONTE VEDRA BEACH, FL 32082 PONTE VEDRA, FL 32082 **Current Mailing Address: New Mailing Address:** 1166 SALT MARSH CIRCLE 2869 S. PONTE VEDRA BLVD. PONTE VEDRA, FL 32082 PONTE VEDRA BEACH, FL 32082 FEI Number: 01-0587896 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARRINGTON, PAMELA G HARRINGTON, PAMELA G 1166 SALT MARSH CIRCLE 2869 S. PONTÉ VEDRA BLVD. PONTE VEDRA BEACH, FL 32082 PONTE VEDRA, FL 32082 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: 04/12/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition HARRINGTON, PAMELA G HARRINGTON, PAMELA G Name: Name: Address: 1166 SALT MARSH CIRCLE Address: 2869 S. PONTE VEDRA BLVD. City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: PONTE VEDRA, FL 32082 Title: Title: (X) Change () Addition () Delete HARRINGTON, ROBERT H JR. Name: Name: HARRINGTON, ROBERT H JR. Address: 1166 SALT MARSH CIRCLE Address: 2869 S. PONTE VEDRA BLVD. City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: PONTE VEDRA, FL 32082 Title: () Delete Title: () Change () Addition MEYER, LAURA Name: Name: 1980 S. SPRING GARDEN AVENUE Address: Address: City-St-Zip: DELAND, FL 32720 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MEYER, WILLIAM Name: 1980 S. SPRING GARDEN AVENUE Address: Address: City-St-Zip: DELAND, FL 32720 City-St-Zip: Title: Title: () Delete () Change () Addition HARRINGTON, ROBERT H SR Name: Name: 254 ARCHERS MEAD Address: Address: City-St-Zip: WILLIAMSBURG, VA 23185 City-St-Zip: Title: () Delete Title: () Change () Addition BLACK, BARBARA L Name: Name: Address: 2146 HAWCREST DR. Address: JACKSONVILLE, FL 32259 City-St-Zip: 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: ROBERT H. HARRINGTON SR. D 04/12/2004