2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010401

CHICO, WILLIS B JR

OVIEDO, FL 32765

2251 BLACK HAMMOCK RD

Name:

Address:

City-St-Zip:

FILED May 01, 2008 Secretary of State

DOCOM	IEN I# NU6000010401		Secretary of State	
Entity Nar	ne: BAGGY PANTS THEATER INC	C.		
Current Principal Place of Business:		New Principal Place of Bus	New Principal Place of Business:	
	DLES DRIVE D, FL 32810			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
	DLES DRIVE D, FL 32810			
FEI Number:	FEI Number Applied Foce with s. 607.193(2)(b), F.S., the corporat		rtificate of Status Desired()	
Name and	Address of Current Registered A	gent: Name and Address of New	Registered Agent:	
CHICO, WILLIS B SR 2251 BLACK HAMMOCK RD OVIEDO, FL 32765 US		HALPIN, STEPHEN J 3027 NEEDLES DRIVE ORLANDO, FL 32810 US	3	
	named entity submits this statement of Florida.	t for the purpose of changing its registered office	or registered agent, or both,	
SIGNATURE: STEPHEN J HALPIN			05/01/2008	
	Electronic Signature of Regist	tered Agent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete HALPIN, STEPHEN J 3027 NEEDLES DRIVE ORLANDO, FL 32810	Title: () Cha Name: Address: City-St-Zip:	nge () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete WILLIAMS, HUNTER 3027 NEEDLES DRIVE ORLANDO, FL 32810	Title: () Cha Name: Address: City-St-Zip:	nge()Addition	
Title:	T () Delete	Title: () Cha	nge () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: STEPHEN J HALPIN P 05/01/2008