

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000000733

FILED  
Feb 10, 2011  
Secretary of State

**Entity Name:** BEAT THE STREETS FOUNDATION, INC.

**Current Principal Place of Business:**

1052 HWY 92 INTERNATIONAL BDLG.  
AUBURNDALE, FL 33823

**New Principal Place of Business:**

501 E. MAIN ST  
HAINES CITY, FL 33844

**Current Mailing Address:**

2927 WALNUT STREET  
WINTER HAVEN, FL 33881

**New Mailing Address:**

2101 LOIS BLVD  
LAKE ALFRED, FL 33850

**FEI Number:** 27-0839398

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MORGART, TIM  
1052 HWY 92 INTERNATIONAL BDLG.  
AUBURNDALE, FL 33823 US

**Name and Address of New Registered Agent:**

MORGART, TIM  
2101 LOIS BLVD.  
LAKE ALFRED, FL 33850 US

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:

02/10/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MORGART, TIM  
Address: 501 E. MAIN ST  
City-St-Zip: HAINES CITY, FL 33844

Title: P  
Name: GRANT, THOMAS  
Address: 501 E. MAIN ST  
City-St-Zip: HAINES CITY, FL 33844

Title: V  
Name: BAILEY, MARY  
Address: 501 E. MAIN ST  
City-St-Zip: HAINES CITY, FL 33844

Title: S  
Name: CREEKBAUM, KAREN  
Address: 501 E. MAIN ST  
City-St-Zip: HAINES CITY, FL 33844

I hereby 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 all other like empowered.

SIGNATURE: TIM MORGART

D

02/10/2011

Electronic Signature of Signing Officer or Director

Date