

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000000733

FILED  
Apr 23, 2012  
Secretary of State

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

**Current Principal Place of Business:**

501 E. MAIN ST  
HAINES CITY, FL 33844

**New Principal Place of Business:**

2101 LOIS BLVD  
LAKE ALFRED, FL 33850

**Current Mailing Address:**

2101 LOIS BLVD  
LAKE ALFRED, FL 33850

**New Mailing Address:**

**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  
2101 LOIS BLVD  
LAKE ALFRED, FL 33850 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: D  
Name: MORGART, TIM  
Address: 2101 LOIS BLVD  
City-St-Zip: LAKE ALFRED, FL 33850

Title: P  
Name: GRANT, THOMAS  
Address: 2101 LOIS BLVD  
City-St-Zip: LAKE ALFRED, FL 33850

Title: V  
Name: BAILEY, MARY  
Address: 2101 LOIS BLVD  
City-St-Zip: LAKE ALFRED, FL 33850

Title: S  
Name: CREEKBAUM, KAREN  
Address: 2101 LOIS BLVD  
City-St-Zip: LAKE ALFRED, FL 33850

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

04/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date