

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000004585

**FILED**  
**May 31, 2004**  
**Secretary of State****Entity Name:** THE B.E.T.A. CHILDREN'S THEATRE, INC.**Current Principal Place of Business:**95 BAYBRIDGE  
GULF BREEZE, FL 32561 US**New Principal Place of Business:**126 BAYBRIDGE  
GULF BREEZE, FL 32561 US**Current Mailing Address:**95 BAYBRIDGE  
GULF BREEZE, FL 32561 US**New Mailing Address:**126 BAYBRIDGE  
GULF BREEZE, FL 32561 US**FEI Number:** 59-3351355**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**KERRIGAN, MICHELLE  
95 BAYBRIDGE  
GULF BREEZE, FL 32561**Name and Address of New Registered Agent:**KERRIGAN, MICHELLE  
126 BAYBRIDGE  
GULF BREEZE, FL 32561

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:**

05/31/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** D ( ) Delete  
**Name:** KERRIGAN, MICHELLE  
**Address:** 95 BAYBRIDGE  
**City-St-Zip:** GULF BREEZE, FL 32561**Title:** DEC ( ) Delete  
**Name:** BIGOT, SHARRON L  
**Address:** 92 5TH AVENUE UNIT 12  
**City-St-Zip:** SHALIMAR, FL 32579**Title:** DEC ( ) Delete  
**Name:** LAWSON, DIANE  
**Address:** 2378 OSPREY DR  
**City-St-Zip:** GULF BREEZE, FL 32561**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** D (X) Change ( ) Addition  
**Name:** KERRIGAN, MICHELLE  
**Address:** 126 BAYBRIDGE  
**City-St-Zip:** GULF BREEZE, FL 32561**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**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:** MICHELLE KERRIGAN

D

05/31/2004

Electronic Signature of Signing Officer or Director

Date