

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000004585

FILED  
Apr 30, 2003  
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:**

**Current Mailing Address:**

95 BAYBRIDGE  
GULF BREEZE, FL 32561 US

**New Mailing Address:**

**FEI Number:** 59-3351355

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KERRIGAN, MICHELLE  
95 BAYBRIDGE  
GULF BREEZE, FL 32561

**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 ( ) Delete  
Name: KERRIGAN, MICHELLE  
Address: 95 BAYBRIDGE  
City-St-Zip: GULF BREEZE, FL 32561

Title: DEC ( ) Delete  
Name: BIGOT, SHARRON L  
Address: 319 GARDNER DR  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: DEC ( ) Delete  
Name: LAWSON, DIANE  
Address: 2378 OSPREY DR  
City-St-Zip: GULF BREEZE, FL 32561

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DEC (X) Change ( ) Addition  
Name: BIGOT, SHARRON L  
Address: 92 5TH AVENUE UNIT 12  
City-St-Zip: SHALIMAR, FL 32579

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

04/30/2003

Electronic Signature of Signing Officer or Director

Date