

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S33326

Entity Name: MS. BETH, INC.

FILED
Jan 17, 2008
Secretary of State

Current Principal Place of Business:

809 WALKERBILT ROAD
5
NAPLES, FL 34110 US

Current Mailing Address:

809 WALKERBILT ROAD
5
NAPLES, FL 34110 US

New Principal Place of Business:

2825 PALM BEACH BLVD
404
FT MYERS, FL 33916 US

New Mailing Address:

2825 PALM BEACH BLVD
404
FT MYERS, FL 33916 US

FEI Number: 65-0244633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WANDERON, THOMAS
809 WALKERBILT ROAD
5
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

LANGLOIS, NORMAN J
2825 PALM BEACH BLVD
404
FT MYERS, FL 33916 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: NORMAN J. LANGLOIS

01/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: LANGLOIS, NORMAN J
Address: 809 WALKERBILT ROAD, SUITE 5
City-St-Zip: NAPLES, FL 34110

Title: DS () Delete
Name: LANGLOIS, MARTHA L
Address: 809 WALKERBILT ROAD, SUITE 5
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: LANGLOIS, NORMAN J
Address: 2825 PALM BEACH BLVD #404
City-St-Zip: FT MYERS, FL 33916

Title: DS (X) Change () Addition
Name: LANGLOIS, MARTHA L
Address: 2825 PALM BEACH BLVD #404
City-St-Zip: FT MYERS, FL 33916

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORMAN J. LANGLOIS

DPT

01/17/2008

Electronic Signature of Signing Officer or Director

Date