

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 08, 2007 8:00 am
Secretary of State

05-14-2007 90073 021 ***150.00

DOCUMENT # P06000129909 1. Entity Name THE BELLEMY GROUP, INC.																							
Principal Place of Business 707 HIGHLAND DRIVE ALTAMONTE SPRINGS, FL 32701			Mailing Address 707 HIGHLAND DRIVE ALTAMONTE SPRINGS, FL 32701																				
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																					
City & State Zip Country		City & State Zip Country		4. FEI Number 86 1175194																			
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For Not Applicable																			
6. Name and Address of Current Registered Agent ALEXANDER, GWENDOLYN B 707 HIGHLAND DRIVE ALTAMONTE SPRINGS, FL 32701																							
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																							
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when certifying)																							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																					
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: right;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td>ALEXANDER, GWENDOLYN B</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>707 HIGHLAND DRIVE ALTAMONTE SPRINGS, FL 32701</td> <td></td> </tr> </table>			TITLE	NAME	☐ Delete	STREET ADDRESS	ALEXANDER, GWENDOLYN B		CITY - ST - ZIP	707 HIGHLAND DRIVE ALTAMONTE SPRINGS, FL 32701		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS			CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																							
SIGNATURE: <u><i>[Signature]</i></u> 4/25/07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																							