

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 215285

Entity Name: LA BELLE FUR CO., INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

ARTHUR LABELLMAN
351 N ORANGE AVE
ORLANDO, FL 32801 US

New Principal Place of Business:

Current Mailing Address:

ARTHUR LABELLMAN
351 N ORANGE AVE
ORLANDO, FL 32801 US

New Mailing Address:

FEI Number: 59-0854840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LABELLMAN, ARTHUR
7678 MARKAM BEND PLACE
SANFORD, FL 32771 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDT () Delete
Name: LABELLMAN, ARTHUR
Address: 7678 MARKAM BEND PLACE
City-St-Zip: SANFORD, FL 32771

Title: SD () Delete
Name: LABELLMAN, ARLINE
Address: 1726 GLENRIDGE WAY
City-St-Zip: WINTER PARK, FL

Title: D () Delete
Name: LABELLMAN, ALEX
Address: 7678 MARKAM BEND PLACE
City-St-Zip: SANFORD, FL 32771

Title: VP () Delete
Name: LABELLMAN, CONNIE
Address: 7678 MARKAM BEND PLACE
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: LABELLMAN, TODD
Address: 839 N. FERNCREEK AVE.
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: TODD LABELLMAN

D

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date