

2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2006 OCT 10 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G30774 1. Entity Name BELLAMY'S ELECTRIC, INC.					
Principal Place of Business % LAYON F. ROBINSON, II 442 OLD MAIN ST BRADENTON, FL 34205			Mailing Address % LAYON F. ROBINSON, II 442 OLD MAIN ST BRADENTON, FL 34205		
2. Principal Place of Business 603 30th St E		3. Mailing Address 610 Key Income Tax			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 5500 MARINA DR STE 1		10062006 REIN-P CR2E098 (11/05)	
City & State PALMETTO FL		City & State HOLMES BEACH FL		4. FEI Number 59-0397520	
Zip 34221		Zip 34217		Country USA	
6. Name and Address of Current Registered Agent LEROY BELLAMY 603 30TH STREET EAST PALMETTO, FL 34221				7. Name and Address of New Registered Agent Name William M. Herold Jr Street Address (P.O. Box Number is Not Acceptable) 5500 MARINA DR STE 1 City HOLMES BEACH FL Zip Code 34217	
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 <small>Signature, typed or printed name of registered agent, and title if applicable</small>				DATE 10/6/06 <small>(NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$750.00 After January 1, 2007, Fee will be \$900.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BELLAMY, LEROY 603 30TH ST. E. PALMETTO, FL 34220	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	900080634879 10/10/06--01066--031 **750.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS JENKINS, MARY 2906 N OSPREY SARASOTA, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BELLAMY, MARY LOIS 603-30TH ST. E. PALMETTO, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BELLAMY, LEROY, JR. 319-22ND ST. W. PALMETTO, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		LEROY BELLAMY		Date 10/6/06 (941) 773-7241	