

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90201 036 ****50.00

DOCUMENT # M01000001802

1. Entity Name
BELLSOUTH ENTERTAINMENT, LLC



Principal Place of Business
**754 PEACHTREE STREET
STE D1481
ATLANTA, GA 30308-1206**

Mailing Address
**1155 PEACHTREE STREET, NE
SUITE 1800
ATLANTA, GA 30309-3610**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02232006 Chg-LLC CR2E083 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR	<input type="checkbox"/> Delete
NAME	SMITH, WILLIAM L	
STREET ADDRESS	675 W PEACHTREE ST NW STE 4501	
CITY-ST-ZIP	ATLANTA, GA 30375	
TITLE	MGR	<input checked="" type="checkbox"/> Delete
NAME	DYKES, R.M.	
STREET ADDRESS	SUITE 2008, 1155 PEACHTREE STREET, N.E.	
CITY-ST-ZIP	ATLANTA, GA 303093610	
TITLE	MGRP	<input type="checkbox"/> Delete
NAME	GRANGER, DONALD R	
STREET ADDRESS	754 PEACHTREE STREET # D1481	
CITY-ST-ZIP	ATLANTA, GA 303081206	
TITLE	VSC	<input checked="" type="checkbox"/> Delete
NAME	NAULT, II, J. LLOYD	
STREET ADDRESS	675 W PEACHTREE ST NW STE 4300	
CITY-ST-ZIP	ATLANTA, GA 30375	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	YOUNG, JAMES N	
STREET ADDRESS	SUITE 14K07, 1155 PEACHTREE STREET, N.E.	
CITY-ST-ZIP	ATLANTA, GA 303093610	
TITLE	AS	<input type="checkbox"/> Delete
NAME	IRVINE, JOYCE CLOWER	
STREET ADDRESS	SUITE 1800, 1155 PEACHTREE STREET, N.E.	
CITY-ST-ZIP	ATLANTA, GA 303093610	

10. ADDITIONS/CHANGES

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	MGR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	W. Patrick Shannon	
STREET ADDRESS	1155 Peachtree Street, NE, #2008	
CITY-ST-ZIP	Atlanta, GA 30309-3610	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VSC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Thompson T. Rawls, II	
STREET ADDRESS	2180 Lake Boulevard, NE, #12D	
CITY-ST-ZIP	Atlanta, GA 30319-6004	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michael L. Wolf	
STREET ADDRESS	1155 Peachtree Street, NE, #14K07	
CITY-ST-ZIP	Atlanta, GA 30309-3610	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Joyce Clower Irvine

2/28/06 (404) 249-4450

Joyce Clower Irvine, Assistant Secretary