2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000104548

Entity Name: BELLAMY BROTHERS RECORDS INC

FILED Jun 06, 2006 Secretary of State

Entity Name: BELLAMY BROTHERS RECORDS, INC.				
Current Principal Place of Business:			New Principal Place of Business:	
13917 RESTLESS LN DADE CITY, FL 33525				
Current Mailing Address:			New Mailing Address:	
13917 RESTLESS LN DADE CITY, FL 33525				
FEI Number:	01-0745832	FEI Number Applied For () FEI Nur	nber Not Appli	cable () Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
WALLER, CHARLES D ESQ 37937 LIVE OAK AVE DADE CITY, FL 33526 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:				
	Electroni	c Signature of Registered Agent		Date
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	D () BELLAMY, DAVI 13917 RESTLES DADE CITY, FL	SS LN	Title: Name: Address: City-St-Zip:	PRES (X) Change () Addition BELLAMY, DAVID 13917 RESTLESS LN DADE CITY, FL 33525
Title: Name: Address: City-St-Zip:	D () BELLAMY, HOW 13917 RESTLES DADE CITY, FL	SS LN	Title: Name: Address: City-St-Zip:	SEC (X) Change () Addition BELLAMY, HOWARD 13917 RESTLESS LN DADE CITY, FL 33525
Title: Name: Address: City-St-Zip:	D () BELLAMY, FRAI 13917 RESTLES DADE CITY, FL	SS LN	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition BELLAMY, ILONA 13917 RESTLESS LANE DADE CITY, FL 33525
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition BELLAMY, SUSAN B 13917 RESTLESS LANE DADE CITY, FL 33525
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition BELLAMY, JENNIFER 13917 RESTLESS LANE DADE CITY, FL 33525

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANCES C BELLAMY D 06/06/2006