

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000104548

**FILED**  
**Apr 04, 2011**  
**Secretary of State**

**Entity Name:** BELLAMY BROTHERS RECORDS, INC.

**Current Principal Place of Business:**

13917 RESTLESS LN  
DADE CITY, FL 33525

**New Principal Place of Business:**

**Current Mailing Address:**

13917 RESTLESS LN  
DADE CITY, FL 33525

**New Mailing Address:**

**FEI Number:** 01-0745832

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WALLER, CHARLES D ESQ  
38038 MERIDIAN AVENUE  
DADE CITY, FL 33525 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

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** BELLAMY, DAVID  
**Address:** 13917 RESTLESS LN  
**City-St-Zip:** DADE CITY, FL 33525

**Title:** SEC  
**Name:** BELLAMY, HOWARD  
**Address:** 13917 RESTLESS LN  
**City-St-Zip:** DADE CITY, FL 33525

**Title:** D  
**Name:** BELLAMY, ILONA  
**Address:** 13917 RESTLESS LANE  
**City-St-Zip:** DADE CITY, FL 33525

**Title:** D  
**Name:** BELLAMY, SUSAN B  
**Address:** 13917 RESTLESS LANE  
**City-St-Zip:** DADE CITY, FL 33525

**Title:** D  
**Name:** BELLAMY, JENNIFER  
**Address:** 13917 RESTLESS LANE  
**City-St-Zip:** DADE CITY, FL 33525

I hereby 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 all other like empowered.

**SIGNATURE:** DAVID BELLAMY

PRES

04/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date