2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000095699

Entity Name: DOLLAR CITY RECORDS, INC.

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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10663 SATINWOOD CIRCLE ORLANDO, FL 32825

Current Mailing Address: New Mailing Address:

10663 SATINWOOD CIRCLE ORLANDO, FL 32825

FEI Number: 51-0599427 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KEYES, JOHN 10663 SATINWOOD CIRCLE ORLANDO, FL 32825 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 CEO () Delete
 Title:
 P (X) Change () Addition

 Name:
 RANGER, MARLON
 Name:
 RANGER, MARLON

 Address:
 8602 AD MIMS RD
 Address:
 8602 AD MIMS RD

Address: 8602 AD MIMS RD Address: 8602 AD MIMS RD City-St-Zip: ORLANDO, FL 32818 City-St-Zip: ORLANDO, FL 32818

Title: CEO () Delete Title: P (X) Change () Addition Name: INGRAM, REGINALD Name: INGRAM, REGINALD

Name: INGRAM, REGINALD Name: INGRAM, REGINALD
Address: 4430 MEDALLION DR UNIT 722 Address: 4430 MEDALLION DR UNIT 722

City-St-Zip: ORLANDO, FL 32808 City-St-Zip: ORLANDO, FL 32808

Title: P () Delete Title: VP (X) Change () Addition

Name: WILLIAMS, JAMES Name: WILLIAMS, JAMES

Address: 5222 N ORANGE BLOSSOM TRAIL UNIT 204 Address: 5222 N ORANGE BLOSSOM TRAIL UNIT 204

City-St-Zip: ORLANDO, FL 32810 City-St-Zip: ORLANDO, FL 32810

Title: DST () Delete Title: CEO (X) Change () Addition

Name: KEYES, JOHN Name: KEYES, JOHN

Address: 5065 GARDENS DRIVE Address: 5065 GARDENS DRIVE City-St-Zip: ORLANDO, FL 32812 City-St-Zip: ORLANDO, FL 32812

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: JOHN KEYES CEO 04/24/2009