

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90356 001 ***150.00

DOCUMENT # P92000012400

1. Entity Name
BEE LINE ENTERTAINMENT, INC.



Principal Place of Business

401 E. SEMORAN BLVD.
CASSELBERRY, FL 32707

Mailing Address

401 E. SEMORAN BLVD.
CASSELBERRY, FL 32707 US

2. Principal Place of Business

401 E. HWY. 436

Suite, Apt. #, etc.

3. Mailing Address

401 E. HWY. 436

Suite, Apt. #, etc.

24048450



04142004

Chg-P

CR2E034 (10/03)

City & State

CASSELBERRY, FL

City & State

CASSELBERRY, FL

4. FEI Number

59-3170852

Applied For

Not Applicable

Zip

32707

Country

US

Zip

32707

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMITH, RANDALL
200 NORTH THORNTON AVENUE
ORLANDO, FL 32801

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

533 VERSAILLES DRIVE

City

MAITLAND

FL

Zip Code

32751

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 resigning)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME VEIGLE, JAMES
STREET ADDRESS 401 E. SEMORAN BLVD.
CITY-STATE-ZIP CASSELBERRY, FL 32707

TITLE D ☐ Delete
NAME VEIGLE, CHARLES
STREET ADDRESS 401 E. SEMORAN BLVD.
CITY-STATE-ZIP CASSELBERRY, FL 32707

TITLE S ☐ Delete
NAME VOGTLIN, NANCY
STREET ADDRESS 401 E. SEMORAN BLVD.
CITY-STATE-ZIP CASSELBERRY, FL 32707

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME VEIGLE, JAMES
STREET ADDRESS 401 E. HWY. 436
CITY-STATE-ZIP CASSELBERRY, FL 32707

TITLE D ☒ Change ☐ Addition
NAME VEIGLE, CHARLES
STREET ADDRESS 401 E. HWY. 436
CITY-STATE-ZIP CASSELBERRY, FL 32707

TITLE S ☒ Change ☐ Addition
NAME VOGTLIN, NANCY
STREET ADDRESS 401 E. HWY. 436
CITY-STATE-ZIP CASSELBERRY, FL 32707

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Nancy Vogtlin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/04

Date

407-260-7003

Daytime Phone #