2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000012400

Entity Name: BEE LINE ENTERTAINMENT, INC.

FILED Feb 20, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

401 E STATE ROAD 436 711 SHADOWMOSS CIRCLE CASSELBERRY, FL 32707 LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

401 E STATE ROAD 436 711 SHADOWMOSS CIRCLE CASSELBERRY, FL 32707 US LAKE MARY, FL 32746 US

FEI Number: 59-3170852 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:

SMITH, RANDALL
533 VERSAILLES DRIVE
MAITLAND, FL 32751 US
GREENE, KATHLEEN S SEC
711 SHADOWMOSS CIRCLE
LAKE MARY, FL 32746 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: KATHLEEN SUSAN GREENE 02/20/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 D () Delete

 Name:
 VEIGLE, JAMES

 Address:
 401 E STATE ROAD 436

City-St-Zip: CASSELBERRY, FL 32707
Title: D () Delete

 Name:
 VEIGLE, CHARLES

 Address:
 401 E STATE ROAD 436

 City-St-Zip:
 CASSELBERRY, FL 32707

 Title:
 S
 () Delete

 Name:
 VOEGTLIN, NANCY

 Address:
 401 E STATE ROAD 436

 City-St-Zip:
 CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: VEIGLE, CHARLES H SR
Address: 711 SHADOWMOSS CIRCLE
City-St-Zip: LAKE MARY, FL 32746

Title: D (X) Change () Addition

Name: VEIGLE, CHARLES H JR
Address: 1042 SHADOWMOSS CIRCLE
City-St-Zip: LAKE MARY, FL 32746

Title: S (X) Change () Addition

Name: GREENE, KATHLEEN S Address: 711 SHADOWMOSS CIRCLE City-St-Zip: LAKE MARY, FL 32746

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: KATHLEEN S GREENE S 02/20/2007