

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S43643

Entity Name: BELLE CITY AMUSEMENTS, INC.

FILED
May 22, 2009
Secretary of State

Current Principal Place of Business:

1901 ST. RD. 419
LONGWOOD, FL 32750

New Principal Place of Business:

1901 STATE ROAD 419
LONGWOOD, FL 32750

Current Mailing Address:

P.O.BOX 6269
DELTONA, FL 32728

New Mailing Address:

PO BOX 6269
DELTONA, FL 32728

FEI Number: 39-0851449

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, BRADLEY J ESQ
538 VIRGINIA DRIVE
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

DAVIS, BRADLEY J ESQ
755 RINEHART ROAD
SUITE 200
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:

05/22/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PANACEK, CHARLES G JR
Address: 1901 ST RD 419
City-St-Zip: LONGWOOD, FL 32750

Title: DV () Delete
Name: PANACEK, MARY J
Address: 1901 ST. RD. 419
City-St-Zip: LONGWOOD, FL 32750

Title: ST () Delete
Name: PANACEK, REBECCA
Address: 1901 ST. RD. 419
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PANACEK, CHARLES G JR
Address: 1901 STATE ROAD 419
City-St-Zip: LONGWOOD, FL 32750

Title: DV (X) Change () Addition
Name: PANACEK, MARY J
Address: 1901 STATE ROAD 419
City-St-Zip: LONGWOOD, FL 32750

Title: ST (X) Change () Addition
Name: PANACEK, REBECCA
Address: 1901 STATE ROAD 419
City-St-Zip: LONGWOOD, FL 32750

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: CHARLES G. PANCEK, JR.

PD

05/22/2009

Electronic Signature of Signing Officer or Director

Date