

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000120568

**Entity Name:** IMAGINARIUM, LLC

**Current Principal Place of Business:**

3910 W. MCKAY AVE  
TAMPA, FL 33609

**Current Mailing Address:**

P. O. BOX 18966  
TAMPA, FL 33679-8966 US

**FEI Number:** 35-2394896

**Certificate of Status Desired:** No

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

GIBBONS, GARY A  
3321 HENDERSON BLVD  
TAMPA, FL 33609 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

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	ROCKER, WILLIAM	Name	SOLOMON, STEPHEN
Address	POST OFFICE BOX 18966	Address	PO BOX 580244
City-State-Zip:	TAMPA FL 33679	City-State-Zip:	ORLANDO FL 32858

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WILLIAM ROCKER

MGRM

02/13/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date