## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018286

Entity Name: FUTUREEVENTS, LLC

FILED Jul 12, 2004 Secretary of State

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

1180 CELEBRATION BLVD., SUITE 106 1180 CELEBRATION BLVD. CELEBRATION, FL 34747

SUITE 106

CELEBRATION, FL 34747

**Current Mailing Address: New Mailing Address:** 

1180 CELEBRATION BLVD., SUITE 106 CELEBRATION, FL 34747

FEI Number: 59-3748353 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:

GALANTI, AVI 1180 CELEBRATION BLVD, #106 CELEBRATION, FL 34747

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

## **MANAGING MEMBERS/MEMBERS:**

**ADDITIONS/CHANGES:** 

MGRM MGRM (X) Change ( ) Addition () Delete MORROW, JUSTIN MORROW, JUSTIN Name: Name:

Address: 1325 LAKE SHADOW CIRCLE #12203 Address: 1919 GOLF VIEW DR. City-St-Zip: MAITLAND, FL 32751 City-St-Zip: RIVER FALLS, WI 54022

Title: MGRM Title: MGRM (X) Change ( ) Addition ( ) Delete

Name: GALANTI, AVI Name: GALANTI, AVI Address: 744 CENTERVALE DR. Address: 932 PAWSTAND RD. City-St-Zip: CELEBRATION, FL 34747 City-St-Zip: CELEBRATION, FL 34747

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: AVI GALANTI 07/12/2004