


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 18, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L02000005973</b> 1. Entity Name FLORIDA KEYS TOYS LLC	
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Principal Place of Business HIGHLAND PARK PLACE 18TH FLOOR 4514 COLE AVE. DALLAS, TX 75205-4185	Mailing Address HIGHLAND PARK PLACE 18TH FLOOR 4514 COLE AVE. DALLAS, TX 75205-4185
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**DO NOT WRITE IN THIS SPACE**



01122005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 46-0476135	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired	<input checked="" type="checkbox"/> <b>\$5.00</b> Additional Fees Required
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6. Name and Address of Current Registered Agent  BOYLE, CONRAD J ESQ. 500 EAST BROWARD BLVD. SUITE 1950 FT. LAUDERDALE, FL 33394
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**DO NOT WRITE  
IN THIS SPACE**

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 reinstating) DATE

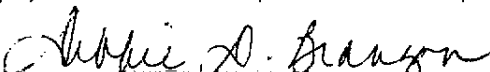
**Filing Fee is \$50.00  
Due by May 1, 2005**

000000182265  
01/19/05-80019-021 55.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BRANSON, FRANK 4514 COLE AVE #1800 HIGLAND PARK PL DALLAS, TX 75205
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BRANSON, DEBBIE 4514 COLE AVE #1800 HIGLAND PARK PL DALLAS, TX 75205
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE  
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11. 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 is true and accurate and that my 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:**  **1-12-05** **214-522-0200**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #