## **2006 LIMITED LIABILITY COMPANY**

## **ANNUAL REPORT**

DOCUMENT # L03000027140

LAKE MARY DANCE STUDIO, L.L.C.

**FILED** Mar 22, 2006 08:00 Ål Secretary of State

Principal Place of Business

Mailing Address

3599 W. LAKE MARY BLVD STE 1-E LAKE MARY, FL 32746

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## DO NOT WRITE IN THIS SPACE

03142006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 56-2379252

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FOOS, HELEN B 1709 SHADOWMOSS CIRCLE LAKE MARY, FL 32746

## DO NOT WRITE IN THIS SDACE

		IN THIS SPACE
	named entity submits this statement for the purpose of changing its registered tions of registered agent.	od office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registared agent and title if applicable. (NOTE. Registered	Agent signature required when reinstating)  DATE
F	iling Fee is \$50.00 ue by May 1, 2006	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS  MGR  FOOS, HELEN B  1709 SHADOWMOSS CIRCLE  LAKE MARY, FL 32746	000000477594 04/06/06-80057-013 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TIPLE NAME STREET ADDRESS		

11. I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, 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 it 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:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

407-350-1304 Daytima Phone #