2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000027140

1. Entity Name

LAKÉ MARY DANCE STUDIO, L.L.C.

DO NOT WRI



FILED Feb 22, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

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



01112007 No Chg-LLC

CR2E083 (11/05)

TE IN THIS SPACE	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 SPACE

	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or both	n, in the State of Florida. I am familiar with, and accept	
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, 2007				
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FOOS, HELEN B 1709 SHADOWMOSS CIRCLE LAKE MARY, FL 32748			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000643594 03/02/07-80008-014 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	could, that the information countlined with this filling days not			

11. I hereby certify that the information supplied with this filing does not qualify 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 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: X/LOWB. Foos Helen B. Foos 1/24/2007 407-350-1304

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGENG MEMBER, OR AUTHORIZED REPRESENTATIVE Days

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