

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013524

FILED  
Mar 15, 2005  
Secretary of State

Entity Name: FANTASY INVESTMENTS II, LLC

## Current Principal Place of Business:

8016 ATLANTIC BOULEVARD  
JACKSONVILLE, FL 32211 US

## New Principal Place of Business:

1236 SOUTH 3RD STREET  
JACKSONVILLE BEACH, FL 32250 US

## Current Mailing Address:

8016 ATLANTIC BOULEVARD  
JACKSONVILLE, FL 32211 US

## New Mailing Address:

1236 SOUTH 3RD STREET  
JACKSONVILLE BEACH, FL 32250 US

FEI Number: 51-0498063

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBERT C COHEN, PA  
301 S. MILWEE STREET  
LONGWOOD, FL 32750 US

## Name and Address of New Registered Agent:

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:

Title: MGR (X) Delete  
Name: LATIFF, SAM  
Address: 1301 S. 1ST ST. # 407  
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: MGRM ( ) Delete  
Name: LATIFF, MARK D  
Address: 4401 WORTH DRIVE E.  
City-St-Zip: JACKSONVILLE BEACH, FL 32207 US

Title: MGRM ( ) Delete  
Name: SIMPSON, KAREN C  
Address: 132 KINGSTON DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32084 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: SIMPSON, KAREN C  
Address: 132 KINGSTON DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32084 US

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: KAREN SIMPSON

MMGR

03/15/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date