


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000019549 1. Entity Name INTERACTIVE MIDWEST PRODUCTIONS, LLC	
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Principal Place of Business

1675 JACKSON ST
LONGWOOD, FL 32750

Mailing Address

1675 JACKSON ST
LONGWOOD, FL 32750

DO NOT WRITE IN THIS SPACE



04242006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

26-0081197

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MATTINGLY, LLOYD J
1675 JACKSON ST
LONGWOOD, FL 32750

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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, 2006

11000019541099
05/10/06-80044-018 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MATTINGLY, LLOYD J
STREET ADDRESS	1675 JACKSON ST
CITY- ST- ZIP	LONGWOOD, FL 32750
TITLE	MGRM
NAME	GORDON, ROBERT
STREET ADDRESS	340 W. BUTTERFIELD RD, SUITE 4B
CITY- ST- ZIP	ELMHURST, IL 60126
TITLE	MGRM
NAME	FRIEDMAN, CHARLES
STREET ADDRESS	6350 68TH AVENUE NORTH
CITY- ST- ZIP	PINELLIS PARK, FL 33781
TITLE	MGRM
NAME	MORRICE, WILLIAM P
STREET ADDRESS	5120 N. MILWAUKEE
CITY- ST- ZIP	CHICAGO, IL 60630
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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IN THIS SPACE**

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:

Lloyd J Mattingly

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

4/26/06 863585-370

Date

Daytime Phone #