

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070974

Entity Name: FANTASY EXPERTS LLC

FILED  
Jan 05, 2005  
Secretary of State

**Current Principal Place of Business:**

1197 GATWICK LOOP  
HEATHROW, FL 32746 US

**New Principal Place of Business:**

**Current Mailing Address:**

1197 GATWICK LOOP  
HEATHROW, FL 32746 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MORGAN, KELLY J  
1197 GATWICK LOOP  
HEATHROW, FL 32746 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: MGRM ( ) Delete  
Name: MORGAN, KELLY J  
Address: 1197 GATWICK LOOP  
City-St-Zip: HEATHROW, FL 32746 US

Title: MGRM ( ) Delete  
Name: BROWN, RYAN E  
Address: 1197 GATWICK LOOP  
City-St-Zip: HEATHROW, FL 32746 US

**ADDITIONS/CHANGES:**

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

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

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: KELLY J MORGAN

MGRM

01/05/2005

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