

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000063284

Entity Name: FANTASY PLAZA, LLC

FILED  
Mar 23, 2006  
Secretary of State

**Current Principal Place of Business:**

10905 BAYSHORE DRIVE  
WINDERMERE, FL 34786

**New Principal Place of Business:**

**Current Mailing Address:**

10905 BAYSHORE DRIVE  
WINDERMERE, FL 34786

**New Mailing Address:**

FEI Number: 20-3051682

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GASDICK, MICHAEL J ESQ.  
390 N. ORANGE AVE.  
SUITE 260  
ORLANDO, FL 32801 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/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: COWIE, WILLIAM J  
Address: 10905 BAYSHORE DRIVE  
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM ( ) Change (X) Addition  
Name: VIRGINIA, COWIE  
Address: 10905 BAYSHORE DRIVE  
City-St-Zip: WINDERNERE, FL 34786

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: VIRGINIA COWIE

MGRM

03/23/2006

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