

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000105502

Entity Name: DREAMS OF FANTASY, LLC

FILED
Mar 12, 2007
Secretary of State

Current Principal Place of Business:

9401 W.COLONIAL DRIVE
#700
OCOOEE, FL 34761

Current Mailing Address:

15305 MARKHAM DRIVE
CLERMONT, FL 34714

New Principal Place of Business:

5250 INTERNATIONAL DRIVE
#F18
ORLANDO, FL 32819 US

New Mailing Address:

5250 INTERNATIONAL DRIVE
#618
ORLANDO, FL 32819 US

FEI Number: 20-4081258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KHAN, NISHAD A
MORAN & SHAMS
#1200, 111 N.ORANGE AVENUE
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

HOLBROOK, JUDY A MGRM
5250 INTERNATIONAL DRIVE
#F18
ORLANDO, FL 32819 US

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: JUDY HOLBROOK

03/12/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HOLBROOK, FRED
Address: 15305 MARKHAM DRIVE
City-St-Zip: CLERMONT, FL 34714

Title: MGR (X) Delete
Name: HOLBROOK, JUDY
Address: 15305 MARKHAM DRIVE
City-St-Zip: CLERMONT, FL 34714

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HOLBROOK, FREDERICK W MGR
Address: 5250 INTERNATIONAL DRIVE
City-St-Zip: ORLANDO, FL 32819 US

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 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: JUDY HOLBROOK

MGRM

03/12/2007

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