2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000123364

Entity Name: FANTASEA OUTFITTERS, INC.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

4040 DANCING CLOUD CT 732 E MACK BAYOU DRIVE

21

DESTIN, FL 32541 SANTA ROSA BEACH, FL 32459

Current Mailing Address: New Mailing Address:

4040 DANCING CLOUD CT 732 E MACK BAYOU DRIVE

4

DESTIN, FL 32541 SANTA ROSA BEACH, FL 32459

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

PHELPS, JUSTIN J PHELPS, JUSTIN J

4040 DANCING CLOUD CT 732 E EMACK BAYOU DRIVE

21

DESTIN, FL 32541 US SANTA ROSA BEACH, FL 32459 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: JUSTIN PHELPS 04/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: PHELPS, JUSTIN J Name: PHELPS, JUSTIN J

 Address:
 4040 DANCING CLOUD CT #321
 Address:
 732 E MACK BAYOU DRIVE #4

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:
 SANRA ROSA BEACH, FL 32459

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 PHELPS, MARCELLA E
 Name:
 PHELPS, MARCELLA E

 Address:
 4040 DANCING CLOUD CT #321
 Address:
 732 E MACK BAYOU DRIVE # 4

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:
 SANTA ROSA BEACH, FL 32459

Title: VP () Delete Title: () Change () Addition

 Name:
 STEFFLER, PAUL
 Name:

 Address:
 4080 DANCING CLOUD CT #230
 Address:

 City-St-Zip:
 DESTIN, FL 32541
 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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUSTIN PHELPS PRES 04/28/2005