

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000038895

FILED
Apr 28, 2009
Secretary of State

Entity Name: FANTASY WORKSHOP, INC.

Current Principal Place of Business:

FANTASY WORKSHOP INC
1807 CLOVERLAWN AVE
ORLANDO, FL 32806 US

New Principal Place of Business:

FANTASY WORKSHOP INC
4992 EAST WIND STREET
ORLANDO, FL 32812 US

Current Mailing Address:

FANTASY WORKSHOP INC
1807 CLOVERLAWN AVE
ORLANDO, FL 32806 US

New Mailing Address:

FANTASY WORKSHOP INC
4992 EAST WIND STREET
ORLANDO, FL 32812 US

FEI Number: 65-0670886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOLLAR, JOHN A D
1807 CLOVERLAWN AVE
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

DOLLAR, JOHN A D
4992 EAST WIND STREET
ORLANDO, FL 32812 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: JOHN A. DOLLAR

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DOLLAR, JOHN
Address: 1807 CLOVERLAWN AVE
City-St-Zip: ORLANDO, FL

Title: C () Delete
Name: DOLLAR, BRENDA
Address: 1807 CLOVERLAWN AVE
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DOLLAR, JOHN A
Address: 4992 EAST WIND STREET
City-St-Zip: ORLANDO, FL 32812

Title: C (X) Change () Addition
Name: DOLLAR, BRENDA S
Address: 4992 EAST WIND STREET
City-St-Zip: ORLANDO, FL 32812

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOHN A. DOLLAR

D

04/28/2009

Electronic Signature of Signing Officer or Director

Date