

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000043062

**Entity Name:** FANTASYWORLD MANAGEMENT SERVICES, INC.**Current Principal Place of Business:**5005 KYNGS HEATH ROAD  
KISSIMMEE, FL 34746**Current Mailing Address:**5005 KYNGS HEATH ROAD  
KISSIMMEE, FL 34746 US**FEI Number:** 59-2063633**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COLLINS, KEN  
5005 KYNGS HEATH ROAD  
KISSIMMEE, FL 34746 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PD
Name	WEINLAND, JEFF
Address	7320 FAIRINGTON COURT
City-State-Zip:	ORLANDO FL 32819

Title	STD
Name	EJUWA, JONATHAN
Address	4702 STRATFORD LANE
City-State-Zip:	EAGAN MN 55125

Title	VP
Name	FURLONG, RICHARD
Address	677 UNION STREET
City-State-Zip:	ROCKLAND MA 02370

Title	DIRECTOR
Name	SLADKEY, JOHN
Address	12812 LINDEN
City-State-Zip:	LEAWOOD KS 66209

Title	D
Name	WASHINGTON, ARTHUR
Address	456 MEADOW RIDGE DRIVE
City-State-Zip:	TALLAHASSEE FL 32312

*I hereby 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 all other like empowered.*

**SIGNATURE:** JEFF WEINLAND**PRESIDENT****01/10/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date