

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000093478

FILED
Jul 07, 2008
Secretary of State

Entity Name: PARACLETE INVESTMENTS, LLC

Current Principal Place of Business:

1707 WEST REYNOLDS STREET
PLANT CITY, FL 33563 US

New Principal Place of Business:

Current Mailing Address:

1707 WEST REYNOLDS STREET
PLANT CITY, FL 33563 US

New Mailing Address:

FEI Number: 20-5802983 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GILLMAN, H. LEO
1707 WEST REYNOLDS STREET
PLANT CITY, FL 33563 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: MGR () Delete
Name: GILLMAN, CAROLYN A
Address: 3305 NORTH KEENE ROAD
City-St-Zip: PLANT CITY, FL 33565 US

Title: MGR () Delete
Name: GILLMAN, H. LEO
Address: 1707 WEST REYNOLDS STREET
City-St-Zip: PLANT CITY, FL 33563 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GILLMAN, CAROLYN A
Address: 3305 NORTH KEENE ROAD
City-St-Zip: PLANT CITY, FL 33565 US

Title: MGRM (X) Change () Addition
Name: GILLMAN, H. LEO
Address: 1707 WEST REYNOLDS STREET
City-St-Zip: PLANT CITY, FL 33563 US

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 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: H. LEO GILLMAN

MGRM

07/07/2008

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