

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000058911

Entity Name: PARADISE NYFL LLC**Current Principal Place of Business:**1723 SE 40TH TERRACE
CAPE CORAL, FL 33904**Current Mailing Address:**1723 SE 40TH TERRACE
CAPE CORAL, FL 33904**FEI Number:** 11-3752586**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LUTZ, KENNETH G
1723 SE 40TH TERRACE
CAPE CORAL, FL 33904 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**Authorized Person(s) Detail :**

Title	MGRM
Name	ROSSI, HENRY L
Address	101 SW 57TH ST
City-State-Zip:	CAPE CORAL FL 33914

Title	MGRM
Name	MORRIS, SARAH J
Address	101 SW 57TH ST
City-State-Zip:	CAPE CORAL FL 33914

Title	MGRM
Name	ROSSI, ANNA M
Address	7 WOODRIDGE ROAD
City-State-Zip:	AMSTERDAM NY 12020

Title	MGRM
Name	MROZKOWSKI, PHYLLIS
Address	327 MEADOWLARK DRIVE
City-State-Zip:	BALLSTON SPA NY 12020

Title	MGR
Name	LUTZ, KENNETH G
Address	1723 SE 40TH TERRACE
City-State-Zip:	CAPE CORAL FL 33904

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KENNETH G. LUTZ

MGR

01/16/2018

Electronic Signature of Signing Authorized Person(s) Detail_____
Date