

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000017980

**Entity Name:** FLORIDA COASTAL PARADISE, LLC

**Current Principal Place of Business:**

4200 SOUTH OCEAN BLVD.  
601  
PALM BEACH, FL 33480-5811

**Current Mailing Address:**

4200 SOUTH OCEAN BLVD.  
601  
PALM BEACH, FL 33480-5811

**FEI Number:** 26-2277307

**Certificate of Status Desired:** No

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

MIKKOLA, HANNU  
4200 SOUTH OCEAN BLVD.  
601  
PALM BEACH, FL 33480-5811 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 MGR  
Name MIKKOLA, HANNU  
Address 4200 SOUTH OCEAN BLVD. #601  
City-State-Zip: PALM BEACH FL 33480-5811

Title MGR  
Name MIKKOLA, ARJA  
Address 4200 SOUTH OCEAN BLVD. #601  
City-State-Zip: PALM BEACH FL 33480-5811

*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:** HANNU MIKKOLA

**MGR**

**02/26/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date