

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90081 033 ****70.00

DOCUMENT # 717108 1. Entity Name PARADISE OF STUART, INC.					
Principal Place of Business FISHERMANS PARADISE 3 SE SAILFISH LANE STUART, FL 34996			Mailing Address FISHERMANS PARADISE 3 SE SAILFISH LANE STUART, FL 34996		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1709669 <div style="float: right;"> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable </div>	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
ZEOLI, SAM 284 SE SAILFISH LANE STUART, FL 34996			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="float: right;"> FL Zip Code </div>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	NAME		TITLE	NAME	
STREET ADDRESS	STREET ADDRESS		STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP		CITY-ST-ZIP	CITY-ST-ZIP	
PD	TURNER, THOMAS A <input type="checkbox"/> Delete		VP	CLAYC STEVENSON <input type="checkbox"/> Change <input type="checkbox"/> Addition	
VD	DRAY, DAVID <input checked="" type="checkbox"/> Delete		VP	CLAYC STEVENSON <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	144 SE SAILFISH LANE		STREET ADDRESS	200 SE SAILFISH LANE	
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP	STUART, FL 34996	
TD	ZEOLI, SAMUEL <input type="checkbox"/> Delete		TD	ZEOLI, SAMUEL <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	284 SE SAILFISH LANE		STREET ADDRESS	284 SE SAILFISH LANE	
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP	STUART, FL 34996	
SD	WIVESTAO, JAN <input checked="" type="checkbox"/> Delete		SD	NICKY CAMPBELL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	73 SAILFISH LANE		STREET ADDRESS	93 SE SAILFISH LANE	
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP	STUART, FL 34996	
D	NORMAN, KEITH <input checked="" type="checkbox"/> Delete		D	JOHN ENGOL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	215 SE 5TH LUCIE BLVD		STREET ADDRESS	63 SE SAILFISH LANE	
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP	STUART, FL 34996	
TITLE	NAME <input type="checkbox"/> Delete		TITLE	NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	STREET ADDRESS		STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP		CITY-ST-ZIP	CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Samuel Zeoli</u> 3/15/07 772-463-6735 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					