

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000006803

FILED  
Jul 15, 2008  
Secretary of State

Entity Name: PARADIES - TALLAHASSEE, LLC

**Current Principal Place of Business:**

3300 CAPITAL CIRCLE SW  
TALLAHASSEE, FL 32310

**New Principal Place of Business:**

**Current Mailing Address:**

5950 FULTON IND. BLVD.  
ATLANTA, GA 30336

**New Mailing Address:**

FEI Number: 58-2525948      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:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: DICKSON, DICK  
Address: 5950 FULTON INDUSTRIAL BLVD.  
City-St-Zip: ATLANTA, GA 30336

Title: MGR      ( ) Delete  
Name: PARADIES, GREGG  
Address: 5950 FULTON INDUSTRIAL BLVD.  
City-St-Zip: ATLANTA, GA 30336

Title: MGR      ( ) Delete  
Name: PARADIES, JAMES  
Address: 5950 FULTON INDUSTRIAL BLVD.  
City-St-Zip: ATLANTA, GA 30336

Title: MGR      ( ) Delete  
Name: MAREKIES, DON  
Address: 5950 FULTON INDUSTRIAL BLVD.  
City-St-Zip: ATLANTA, GA 30336

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DON MAREK

MGR

07/15/2008

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