2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 17, 2006 8:00 am Secretary of State

DOCUMENT # L0100007306 1. Entity Name PARADISE PROPERTIES L.C.					04-17-2006 90056 034 ****50.00				
S arasota, i	W LARK DR. E-34236	Mailing Address 425 MEADOW LARK DR SARASOTA, FL 34236	1		1 (8 2) 8 1		31567	Ariodi aik koor	
3) Principal P	DECO OF AUSINOSS OF AVE		NGE A	VE					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			04132006	Chg-LLC	CR2E083 (11/05	5)	
SARASOTA FL		SALAS OTA	LASOTA, FL		4. FEI Number Applied For 65-1110569 Not Applicable				
34a		Zip 3423L	Country A		5. Certificate	of Status Desired	□ \$5.00 A Fee Requi	dditional red	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
SABA, RICHARD D				Name					
2033 MAIN ST, STE 303 SARASOTA, FL 34237			Street	Street Address (P.O. Box Number is Not Acceptable)					
				FL Zip Code					
The above the obligat	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered office	or registere	d agent, or bott	n, in the State of Flo	orida. I am familiar wit	n, and accept	
SIGNATURE .									
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	: Registered Agent sign	ature required v	rhen reinstating)		DATE		
Filing Fee is \$50.00 Due by May 1, 2006						Make check payable to Florida Department of State			
9.	MANAGING MEMBEI	RS/MANAGERS	10.			ADDITIONS/	CHANGES		
TITLE NAME	MGR								
	TIBBETTS, DOUGLAS A	☐ Defete	TITLE NAME			. <i>i.</i>	Change	Addition	
STREET ADDRESS City-St-Zip	1630 RINGLING BOULEVARD	☐ Delete	NAME Street address	330	S. ORI	INGE AVE	Change	Addition	
			NAME STREET ADDRESS CITY-S1-ZIP	330 3A1	S. URI LASUTA	TAGE AVE	Change		
CITY-ST-ZIP	1630 RINGLING BOULEVARD SARASOTA, FL 34236	☐ Delete	NAME Street address	330 3A1	S. ORA CASUTA	INCE AVE	Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	1630 RINGLING BOULEVARD SARASOTA, FL 34236 MGR SLIGAR, GARY R 425 MEADOW LARK DRIVE		NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	330 3A1 330	S. ORI CASUTR S. OR	ANCE AVE 1 BL 34 ANGE A	Change		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1639 RINGLING BOULEVARD SARASOTA, FL 34236 MGR SLIGAR, GARY R 425 MEADOW LARK DRIVE SARASOTA, FL 34236	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	330 3A1 330 5AR	S. ORI LASUTR S. OR ASOTA	ANCE AVE 1 BL 34 ANCE AN 1 FL 3	Change 236 Change VE V236		
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1639 RINGLING BOULEVARD SARASOTA, FL 34236 MGR SLIGAR, GARY R 425 MEADOW LARK DRIVE SARASOTA, FL 34236 MGR	□ Delete	NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE		S. ORA CASUTR S. OR ASOTA	ANCE AVE 1 BL 34 ANCE A 1 BL 3	E 236	☐ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	1630 RINGLING BOULEVARD SARASOTA, FL 34236 MGR SLIGAR, GARY R 425 MEADOW LARK DRIVE SARASOTA, FL 34236 MGR SULLIVAN, BRIAN M 2185 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228	□ Delete	NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS		S. ORA CASUTA S. OR ASOTA	ANCE AVE 1 BL 34 ANCE A 1 FL 3	Z36 X Change VE Y23 } ☐ Change	☐ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1639 RINGLING BOULEVARD SARAGOTA, FL 34236 MGR SLIGAR, GARY R 425 MEADOW LARK DRIVE SARASOTA, FL 34236 MGR SULLIVAN, BRIAN M 2185 GULF OF MEXICO DRIVE	☐ Delete☐ Delete☐ Delete☐ Delete☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		S. ORA CASUTA S. OR ASOTA	ANCE AVE 1 BL 34 ANCE AN 1 FL 3	E 236	☐ Addition	
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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS

CITY-ST-ZIP

A/10/06 941 80751