

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000014926

Entity Name: P&P PARADISE FOUND, L.L.C.

FILED  
Feb 17, 2004  
Secretary of State

## Current Principal Place of Business:

3300 BONITA BEACH RD SW #150  
BONITA SPRINGS, FL 34134

## New Principal Place of Business:

## Current Mailing Address:

3300 BONITA BEACH RD SW #150  
BONITA SPRINGS, FL 34134

## New Mailing Address:

FEI Number: 75-3060190

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWN, PAUL H  
2660 AIRPORT ROAD SOUTH  
NAPLES, FL 34112 US

## Name and Address of New Registered Agent:

BROWN, THOMAS R ESQ  
2660 AIRPORT ROAD SOUTH  
NAPLES, FL 34112 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: THOMAS R. BROWN, ESQ

02/17/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: MILLER, PAUL H  
Address: 3300 BONITA BEACH RD. SW #150  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: MGRM ( ) Delete  
Name: MILLER, PATRICIA K  
Address: 3300 BONITA BEACH RD. SW #150  
City-St-Zip: BONITA SPRINGS, FL 34134

## ADDITIONS/CHANGES:

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 for the exemption stated in Section 119.07(3)(i), 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: PAUL H. MILLER

MGRM

02/17/2004

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