

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000030034

Entity Name: PARIS DEVELOPMENT, L.C.

**FILED**  
**Jun 30, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

15310 AMBERLY DRIVE SUITE # 250-44  
TAMPA, FL 33647

**New Principal Place of Business:**

15310 AMBERLY DRIVE  
TAMPA, FL 33647

**Current Mailing Address:**

15310 AMBERLY DRIVE SUITE # 250-44  
TAMPA, FL 33647

**New Mailing Address:**

15310 AMBERLY DRIVE  
TAMPA, FL 33647

FEI Number: 22-3887447      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:**

PARIS, MARK  
15310 AMBERLY DRIVE SUITE # 250-44  
TAMPA, FL 33647      US

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

PARIS, MARK  
15310 AMBERLY DRIVE  
TAMPA, FL 33647      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:

06/30/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: PARIS, MARK  
Address: 15310 AMBERLY DRIVE SUITE # 250-44  
City-St-Zip: TAMPA, FL 33647

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: PARIS, MARK  
Address: 15310 AMBERLY DRIVE  
City-St-Zip: TAMPA, FL 33647

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: MARK PARIS

PA

06/30/2005

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