

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Apr 19, 2006 08:00 AM
Secretary of State**

DOCUMENT # L04000028177

1. Entity Name

PARADISE QUALITY HOMES, LLC



Principal Place of Business

353 SELMA ST
PORT ST JOE, FL 32456

Mailing Address

353 SELMA ST
PORT ST JOE, FL 32456



04162006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

56-2453629

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HART, RAYMOND P
353 SELMA ST
PORT ST JOE, FL 32456

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
HART, RAYMOND P
353 SELMA ST
PORT ST JOE, FL 32456

TITLE
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CITY-ST-ZIP

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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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

RAYMOND P. HART
Raymond Hart

4/15/06 (850) 647-9265

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

Date

Daytime Phone #