


2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT

**FILED**  
**Mar 20, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000053474**  
1. Entity Name  
PARADISE PALMS LTD. CO.



Principal Place of Business  
1441 VENDOME COURT  
CAPE CORAL, FL 33904

Mailing Address  
1441 VENDOME CT  
CAPE CORAL, FL 33904



02212006 No Chg-LLC CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-1408477	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
UNGER, ERIC M  
1441 VENDOME COURT  
CAPE CORAL, FL 33904

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and the if applicable (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM UNGER, ERIC M 1441 VENDOME COURT CAPE CORAL, FL 33904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM UNGER, SUZANNE M 1441 VENDOME COURT CAPE CORAL, FL 33904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM UNGER, RICHARD A 29 CABOT LANE KINNELON, NJ 07405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM UNGER, DOLORES A 29 CABOT LANE KINNELON, NJ 07405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AUSTIN, DAWN A 26 CABOT LANE KINNELON, NJ 07405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AUSTIN, THOMAS E 26 CABOT LANE KINNELON, NJ 07405

U00000475142  
04/05/06-80003-022 50.00

**DO NOT WRITE IN THIS SPACE**

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: Eric Unger

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #