2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000055860

1. Enlity Name
TOUCAN PARADISE, LLC



FILED Feb 19, 2007 08:00 AM Secretary of State

Principal Place of Business

1365 WEST HIGHWAY 98

UNIT 402

MARY ESTHER, FL 32569

Mailing Address

1365 WEST HIGHWAY 98

UNIT 402

MARY ESTHER, FL 32569



02152007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1472128 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

WIDMAN, SHANNON 56 SPIRES LANE

SANTA ROSA BEACH, FL 32459

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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, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	ROSS C SHAW, EXEC. FOR THE ESTATE OF ANGEL
STREET ADDRESS	665 GOLF COURSE DRIVE
CITY-SI-ZIP	FT WALTON BEACH, FL 32547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GIESLER, DANNY R 1365 WEST HWY 98 UNIT 402 MARY ESTHER, FL 32569
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TITLE NAME STREET ADDRESS CITY-SI-ZIP	H C V 11 V TI
NAME 35. STREET ADDRESS. CITY-ST-ZIP	0 22 (3 5) \$ 300 \$ 200 \$

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11. I hereby certify that the information supplied with this fifting 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:

SIGNATURE WO TYPED OR PRI

Dany R. Giesler

15 Febro7

(850)585-1944

Date

Daytime Phone #