- 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000033504

1. Entity Name

PAR INVESTMENTS OF SARASOTA, LLC

Principal Place of Business 4440 FRUITVILLE RD SARASOTA, FL 34232

Mailing Address

4440 FRUITVILLE RD SARASOTA, FL 34232

FILED Jan 09, 2007 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

01032007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2904453 Applied For Not Applicable

5. Certificate of Status Desired

\$5,00 Additional Fee Required

6. Name and Address of Current Registered Agent

MESSICK, ROBERT E ESQ. 2033 MAIN STREET, SUITE 600 SARASOTA, FL 34237

the obligations of registered agent

SIGNATURE:

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CIONIXTURE			
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			U00000579948 01/10/07-80027-020 50.00
9,	MAÑAGING MEMBERS/MANAGERS		<u></u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TUROSIENSKI, PETER 4440 FRUITVILLE ROAD SARASOTA, FL 34232		
TITLE NAME STREET ABORESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE
TITLE NAME STREET ACCRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filling 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 empowers to execute this report as required by Chapter 608, Florida Statutes.			

ED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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