

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 19, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # L05000061953

1. Entity Name  
BUILDERS IN PARADISE, LLC



Principal Place of Business  
203 N. ARNOLD ROAD  
B  
PANAMA CITY BEACH, FL 32413

Mailing Address  
203 N. ARNOLD ROAD  
B  
PANAMA CITY BEACH, FL 32413



03122007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
76-0778422

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

ABBOTT, HOPE  
203 N. ARNOLD ROAD  
B  
PANAMA CITY BEACH, FL 32413

**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

HOPE ABBOTT

3/12/07

Signature of, 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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
ABBOTT, HOPE  
203 N. ARNOLD ROAD #B  
PANAMA CITY BEACH, FL 32408

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGM  
ABBOTT, LEWIS  
203 N. ARNOLD ROAD #B  
PANAMA CITY BEACH, FL 32413

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

U000000670107  
03/27/07-80100-004 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:

LEWIS ABBOTT

3/12/07

850-685-5039

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

Date

Daytime Phone #