

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000080226

Entity Name: CINNIMONIUM PARADISUS, LLC

FILED  
Jan 04, 2008  
Secretary of State

**Current Principal Place of Business:**

4505 WILKINSON ROAD  
SARASOTA, FL 34233

**New Principal Place of Business:**

**Current Mailing Address:**  
4505 WILKINSON ROAD  
SARASOTA, FL 34233

**New Mailing Address:**

FEI Number: 20-3322607      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MACKSEY, TIMOTHY P  
4505 WILKINSON RD.  
SARASOTA, FL 34233 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MACKSEY, TIMOTHY P  
Address: 4505 WILKINSON RD.  
City-St-Zip: SARASOTA, FL 34233

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: VAN DER ARK, CLAIRE M. M.  
Address: 4505 WILKINSON RD.  
City-St-Zip: SARASOTA, FL 34233

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: TIMOTHY P. MACKSEY

DPST

01/04/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date