

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094939

FILED  
Jan 20, 2009  
Secretary of State

Entity Name: ROYAL PARADISE HOMES, LLC

**Current Principal Place of Business:**

12601 AVALON ROAD  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 622903  
OVIEDO, FL 32762

**New Mailing Address:**

FEI Number: 38-3744440

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CLARK, SCOTT D  
655 W. MORSE BOULEVARD  
SUITE 212  
WINTER PARK, FL 32789 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: EMBASSY CUSTOM HOMES, , INC.  
Address: 12601 AVALON ROAD  
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGRM ( ) Delete  
Name: BEELER BUILT, LLC,  
Address: 3511 N. PINE HILLS ROAD  
City-St-Zip: ORLANDO, FL 32808

Title: MGRM ( ) Delete  
Name: JORDAN, GIOVANNI B  
Address: PO BOX 622903  
City-St-Zip: OVIEDO, FL 32762

**ADDITIONS/CHANGES:**

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

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

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: LARRY JORDAN

MGR

01/20/2009

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