2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L06000113699

1. Entity Name
THE PARIS GROUP, LLC

Principal Place of Business	Mailing Address
3825 SOUTH FLORIDA AVE., SUITE 5 LAKELAND, FL 33813	3825 SOUTH FLORIDA AVE., SUITE 5 LAKELAND, FL 33813

DO NOT WRITE IN THIS SPACE

02072008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number 74-3199424	Applied For
	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

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6. Name and Address of Current Registered Agent

MAHONEY, MARIA
3825 SOUTH FLORIDA AVE
SUITE 5
LAKELAND, FL 33813

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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_____
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MAHONEY, MARIA 3825 SOUTH FLORIDA AVE., SUITE 5 LAKELAND, FL 33813
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/03/08-80016-020 138.75

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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: _____   3/12/2008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #