## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000006100

Entity Name: FLORIDA HOLIDAY PARADISE, LLC

**FILED** May 06, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3200 E 6TH STREET LEHIGH ACRES, FL 33972 **Current Mailing Address: New Mailing Address:** 3200 E 6TH STREET LEHIGH ACRES, FL 33972 FFI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HENNING LAW FIRM, P.A. WEBER, REINER MR. 4500 EXECUTIVE DRÍVE 3200 E 6 TH SSREET SUITE 210 LEHIGH ACRES, FL 33972 US NAPLES, FL 34119 US 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: REINER WEBER 05/06/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete WEBER, REINER Name: Name: Address: ACKERSMANNSTRASSE 30 Address: City-St-Zip: LIPPSTADT, GERMANY, GE 59558 GE City-St-Zip: Title: () Change () Addition

Title: MGRM () Delete

Name: WEBER, WALTRAUD Address: ACKERSMANNSTRASSE 30

City-St-Zip: LIPPSTADT, GERMANY, GE 59558 GE 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: REINER WEBER **MGRM** 05/06/2008