

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 18, 2008 8:00 am
Secretary of State

08-18-2008 90050 021 ***150.00

DOCUMENT # L07000006292

1. Entity Name
PARAGON HOMES, LLC



Principal Place of Business
**5600 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33021**

Mailing Address
**5600 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33021**

00040470



2. Principal Place of Business - No P.O. Box #

3000 W. State Rd. 7

3. Mailing Address

P.O. Box 823285

Suite, Apt. #, etc.

Suite, Apt. #, etc.

08142008 Chg-LLC CR2E083 (12/06)

City & State

Miramar FL

City & State

Yembooke Pines FL

4. FEI Number

Applied For

☒ Not Applicable

Zip

33023

Country

USA

Zip

33082

Country

USA

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**JOHNNY A. GASPARD, PLLC ATTORNEYS AT LAW
15025 N.W. 77TH AVENUE
SUITE 116
MIAMI LAKES, FL 33014**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
GORDON, DANIELE
5600 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33021** ☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
Daniele Gordon
5600 W. State Rd. 7
Miramar FL 33023** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
Zachary Cameron
3000 W. State Rd. 7
Miramar FL 33023** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: Daniele Gordon

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

8/14/08

Date

754-246-6565

Daytime Phone #