

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000036628

FILED  
Jul 30, 2008  
Secretary of State

**Entity Name:** PARADISE LANDSCAPING AND GROUNDS MANAGEMENT LLC

**Current Principal Place of Business:**

1975 HARBOR POINT DR  
MERRITT ISLAND, FL 32952

**New Principal Place of Business:**

**Current Mailing Address:**

1975 HARBOR POINT DR  
MERRITT ISLAND, FL 32952

**New Mailing Address:**

FEI Number: 14-1994634      FEI Number Applied For ( )      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:**

MANKES, GLENN  
1975 HARBOR POINT DR  
MERRITT ISLAND, FL 32952      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: MANKES, GLENN  
Address: 1975 HARBOR POINT DR  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: MGRM      ( ) Delete  
Name: MANKES, KIM  
Address: 1975 HARBOR POINT DR  
City-St-Zip: MERRITT ISLAND, FL 32952

**ADDITIONS/CHANGES:**

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: GLENN MANKES

VP

07/30/2008

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