

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000066794

Entity Name: NATURE'S PARADISE, LLC

FILED  
Apr 28, 2009  
Secretary of State

**Current Principal Place of Business:**

14022 5TH STREET  
SUITE C  
DADE CITY, FL 33525

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1165  
DADE CITY, FL 33526

**New Mailing Address:**

FEI Number: 26-2526901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 US

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

RIEF III, FRANK J  
401 E. JACKSON STREET  
SUITE 1700  
TAMPA, FL 336025250 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: FRANK J. RIEF III

04/28/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PRICE, PICKENS C  
Address: P.O. BOX 1165  
City-St-Zip: DADE CITY, FL 33526

**ADDITIONS/CHANGES:**

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: PICKENS C. PRICE

MGRM

04/28/2009

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