2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004649

ROSIER, ETHELYN R

1062 REVILLA LANE

ROCKLEDGE, FL 32955 US

Name:

Address:

City-St-Zip:

FILED Feb 04, 2008 Secretary of State

Entity Name: PARADISE COOLJC, INC **Current Principal Place of Business: New Principal Place of Business:** 414 PENNSYLVANIA AVE ROCKLEDGE, FL 32955 **Current Mailing Address: New Mailing Address:** 414 PENNSYLVANIA AVE ROCKLEDGE, FL 32955 FEI Number: 87-0696889 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROWN, HOMER R 992 DEMARET DRIVE ROCKLEDGE, FL 32955 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BROWN, HOMER R Name: Name: Address: 992 DEMARET DRIVE Address: City-St-Zip: ROCKLEDGE, FL 32955 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: BROWN, ROBIN Name: Address: 992 DEMARET DRIVE Address: City-St-Zip: ROCKLEDGE, FL 32955 US City-St-Zip: Title: () Delete Title: () Change () Addition

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: HOMER R BROWN P 02/04/2008