


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000110310	
1. Entity Name PARADISE REALTY OF DAYTONA, INC.	

Principal Place of Business P.O. BOX 265715 DAYTONA BEACH, FL 32126	Mailing Address P.O. BOX 265715 DAYTONA BEACH, FL 32126
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01022007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4063697	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BENEZETTE, JON E 516 N. PENINSULA AVE. DAYTONA BEACH, FL 32118
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DO NOT WRITE IN THIS SPACE

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 \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BENEZETTE, JON E 516 N. PENINSULA AVE. DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST BENEZETTE, DIANA 516 N. PENINSULA AVE. DAYTONA BEACH, FL 32118
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U00000576847 01/05/07-80002-022 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
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12. 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 or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jon E. Benezette 01/03/07 386-253-6864
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #