


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 15, 2006 08:00 AM
Secretary of State

DOCUMENT # S88564 1. Entity Name PARADISE ISLE OF MILTON INVESTMENTS, INC.	
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Principal Place of Business 6640 NICHOLS DR MILTON, FL 32570 US	Mailing Address 6640 NICHOLS DR MILTON, FL 32570 US
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05112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3112447	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 ROTTENBERRY, CHARLES K. 7649 RIVER ROAD MILTON, FL 32583

**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 holder or individual or corporate agent and the individual or corporate agent or corporate agent designated by the corporation)

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	DP ROTTENBERRY, CHARLES K. 7649 RIVER RD. MILTON, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	DV BLEUEL, HOWARD L JR 6640 NICHOLS DR MILTON, FL 32570
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05/20/06-80062-018 150.00

**DO NOT WRITE
IN THIS SPACE**

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 a power of attorney.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-06 850 981 1631