

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000100036

**FILED**  
**Feb 22, 2016**  
**Secretary of State**  
**CC6482257193**

**Entity Name:** PARADISE COASTAL PROPERTIES LLC

**Current Principal Place of Business:**

1577 EAST BRAINERD STREET  
PENSACOLA, FL 32503

**Current Mailing Address:**

1577 EAST BRAINERD STREET  
PENSACOLA, FL 32503 US

**FEI Number:** 45-3278749

**Certificate of Status Desired:** No

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

GOLDSMITH, KAREN  
1577 EAST BRAINERD STREET  
PENSACOLA, FL 32503 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

**Authorized Person(s) Detail :**

Title MGRM  
Name GOLDSMITH, WILLIAM  
Address 1577 EAST BRAINERD STREET  
City-State-Zip: PENSACOLA FL 32503

Title MGRM  
Name GOLDSMITH, KAREN  
Address 1577 EAST BRAINERD STREET  
City-State-Zip: PENSACOLA FL 32503

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WILLIAM GOLDSMITH

**MGRM**

**02/22/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date