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: THOMAS R TIPPS

Electronic Signature of Signing Authorized Person(s) Detail

Name and Address of Current Registered Agent:

SEARS, VIKKI L 1 BEACH DRIVE SE APT 2409 ST. PETERSBURG, FL 33701 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	E: VIKKI L. SEARS			03/19/2015	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MANAGER	Title	MANAGER		
Name	SEARS, ANITA K	Name	SEARS, VIKKI L		
Address	1 BEACH DRIVE SE APT 2409	Address	1 BEACH DRIVE SE APT 2409		
City-State-Zip:	ST. PETERSBURG FL 33701	City-State-Zip:	ST. PETERSBURG FL 33701		
Title	MANAGER				
Name	TIPPS, THOMAS R				
Address	1 BEACH DRIVE SE APT 2409				

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000014485

Entity Name: FULCRUM DEVELOPMENT GROUP, LLC

Current Principal Place of Business:

1 BEACH DRIVE SE APT 2409 ST. PETERSBURG, FL 33701

Current Mailing Address:

1 BEACH DRIVE SE APT 2409 ST. PETERSBURG, FL 33701 US

FEI Number: 36-4732685

City-State-Zip: ST. PETERSBURG FL 33701

MEMBER

03/19/2015

FILED Mar 19, 2015 Secretary of State CC2651658466

Certificate of Status Desired: No

Date