

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000140114

Entity Name: PARADIGM SHIFT DEVELOPMENT LLC**Current Principal Place of Business:**6029 CHURCHSIDE DR.
LITHIA, FL 33547**Current Mailing Address:**6029 CHURCHSIDE DR.
LITHIA, FL 33547 US**FEI Number:** 46-3844182**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PETERSON, JOHN D
6029 CHURCHSIDE DR.
LITHIA, FL 33547 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	PETERS, JARED M
Address	6029 CHURCHSIDE DR.
City-State-Zip:	LITHIA FL 33547

Title	MGRM
Name	STRYKER, NICHOLAS
Address	6029 CHURCHSIDE DR.
City-State-Zip:	LITHIA FL 33547

Title	MGRM
Name	LANIER, HOLDEN
Address	6029 CHURCHSIDE DR.
City-State-Zip:	LITHIA FL 33547

Title	MGRM
Name	LUCAS, KEANE
Address	6029 CHURCHSIDE DR.
City-State-Zip:	LITHIA FL 33547

Title	MGRM
Name	SPEER, CHAD
Address	6029 CHURCHSIDE DR.
City-State-Zip:	LITHIA FL 33547

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: JARED M PETERSON

CEO

04/30/2014

Electronic Signature of Signing Authorized Person(s) Detail_____
Date