

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000015236

**FILED**  
**Feb 02, 2012**  
**Secretary of State**

**Entity Name:** PARAGON DEVELOPMENT GROUP, L.L.C.

**Current Principal Place of Business:**

402 FRONTAGE RD N  
REAR  
PLANT CITY, FL 33563

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1328  
PLANT CITY, FL 33564

**New Mailing Address:**

**FEI Number:** 59-3689770

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WALPOLE, EDWIN IV  
402 FRONTAGE RD N, REAR  
PLANT CITY, FL 33563 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WALPOLE, EDWIN IV  
Address: PO BOX 1328  
City-St-Zip: PLANT CITY, FL 33564

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: EDWIN WALPOLE, IV

MGMR

02/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date