

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000035405

FILED
May 22, 2005
Secretary of State

Entity Name: PARADIGM MANAGEMENT & DEVELOPMENT SERVICES, LLC

Current Principal Place of Business:

P.O. BOX 17355
PLANTATION, FL 33318

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 17355
PLANTATION, FL 33318 US

New Mailing Address:

FEI Number: 65-1087030 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GIBSON, BARBARA
601 GLENWOOD LANE
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

GIBSON, BARBARA DR.
601 GLENWOOD LANE
PLANTATION, FL 33317 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: DR. BARBARA GIBSON

05/22/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: GIBSON, BARBARA
Address: P.O. BOX 17355
City-St-Zip: PLANTATION, FL 33318 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GIBSON, BARBARA DR.
Address: P.O. BOX 17355
City-St-Zip: PLANTATION, FL 33318 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: DR. BARBARA GIBSON

MGR

05/22/2005

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