

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000060678

Entity Name: PARADIGM DRIFT LLC

**FILED**  
**Apr 15, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3059 BRACCI DRIVE  
ST. JAMES CITY, FL 33956

**New Principal Place of Business:**

**Current Mailing Address:**

3059 BRACCI DRIVE  
ST. JAMES CITY, FL 33956

**New Mailing Address:**

FEI Number: 34-2010704

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VADAS, BARBARA  
3059 BRACCI DRIVE  
ST. JAMES CITY, FL 33956 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: MGR  
Name: VADAS, BARBARA  
Address: 3059 BRACCI DRIVE  
City-St-Zip: ST. JAMES CITY, FL 33956

Title: MGR  
Name: VADAS, LUKE S  
Address: 3059 BRACCI DRIVE  
City-St-Zip: ST. JAMES CITY, FL 33956

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: BARBARA VADAS

MANA

04/15/2010

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