

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000066501

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Entity Name:** PARAGON MANAGEMENT PROFESSIONALS, LLC

**Current Principal Place of Business:**

5720 OLD OCEAN BLVD  
2W  
OCEAN RIDGE, FL 33435

**New Principal Place of Business:**

**Current Mailing Address:**

5720 OLD OCEAN BLVD  
2W  
OCEAN RIDGE, FL 33435

**New Mailing Address:**

**FEI Number:** 26-3024166

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OBERHELMAN, NATALIE J  
5720 OLD OCEAN BLVD  
2W  
OCEAN RIDGE, FL 33435 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:** OBERHELMAN, NATALIE J  
**Address:** 5720 OLD OCEAN BLVD, 2W  
**City-St-Zip:** OCEAN RIDGE, FL 33435

**Title:** MGR  
**Name:** KHATTAR, RAJIV  
**Address:** 5720 OLD OCEAN BLVD, 2W  
**City-St-Zip:** OCEAN RIDGE, FL 33435

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:** NATALIE OBERHELMAN

MGR

01/13/2010

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