

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000006064

Entity Name: CAREER SHIFT, LLC

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

139 TEABERRY CIRCLE  
CHAGRIN FALLS, OH 44022

**New Principal Place of Business:**

**Current Mailing Address:**

13827 TORTUGA POINT DRIVE  
JACKSONVILLE, FL 32225

**New Mailing Address:**

FEI Number: 20-1930280

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MATTA, MARK W  
13827 TORTUGA POINT DRIVE  
JACKSONVILLE, FL 32225 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: HARLOW, AL  
Address: 139 TEABERRY CIRCLE  
City-St-Zip: CHAGRIN FALLS, OH 44022

Title: MGR  
Name: MATTA, MARK  
Address: 13827 TORTUGA POINT DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

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: MARK W. MATTA

MGR

04/29/2011

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