



April 28, 2015

Certified Mail—Return Receipt Requested

Top Hat Plan Exemption
Employee Benefits Security Administration, Room N-1513
U.S. Department of Labor
200 Constitution Avenue NW
Washington, DC 20210

Re: Top Hat Plan Exemption Filing

Gentlemen:

In accordance with DOL Reg. §2520.104-23, pleased be advised as follows:

1. The name and address of the employer is:

Shaw Development, LLC
25190 Bernwood Drive
Bonita Springs, Florida 34135

2. The employer identification number of the employer is 11-2062656.
3. The employer maintains one plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.
4. The plan currently covers 4 participants.

Also enclosed is a copy of this filing. Please date stamp the copy and return it to the undersigned in the enclosed stamped envelope.

Thank you for your time and consideration in this matter.

Very truly yours,

Shaw Development, LLC

By: 

Kevin Hawkesworth, President & CEO

Shaw Development, LLC

ISO 9001 Registered Quality Assurance System
ISO 14001 Registered Environmental Management System

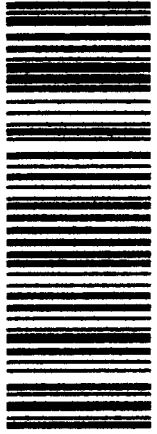
K. Vecker



Shaw Development

25190 BERNWOOD DRIVE
BONITA SPRINGS, FL 34135

CERTIFIED MAIL



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