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PROFIT CORPORATION **ANNUAL REPORT**

1997

Principal Place of Business



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L98888

(5)

PARAGON HOMEBUILDERS, INC.

Mailing Address

FILED May 08 1997 8:00am Secretary of State



VERO BOH FL US		2590 B5TH COURT VERO BCH FL 32966-1790 US	0					
•					3. Date Incorporated or Qualified 09/06/1990	3a. Date of Last 04/25/1996		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	'	Applied For	
21		26			65-0224475	1	Vot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional ! Fee Required			
City & State	9	City & State	-		Election Campaign Financing Trust Fund Contribution		0 May Be d to Fees	
Zip 24	Country 25	Ζφ 29	30 Cou	ntry	8. This corporation has liability for in Florida Statutes	ntangible tax under Yes 💢 No	s. 199,032,	
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Reg	gistered Agent		
	RACKEN, P. SCOTT			81 Name				
1425 18 AVENUE S.W. VERO BEACH FL 32962				82 Street Add	rect Address (P.O. Box Number is Not Acceptable)			
ı				83	The state of the second			
· -				84 City		FL 85 Zig	o Code	
11. Pursuant i office or re agent. I a	to the provisions of Sections 607.050 egistered agont, or both, in the State rn familiar with, and accept the oblig	02 and 607.1508, Florida Statu of Florida Such change was ations of, Section 607.0505, F	ites, the at authorized lorida Stat	ove-named corpora by the corpora utes.	poration submits this statement for the p tion's beard of directors. I hereby accep	urpose of changing t the appointment a	its registered is registered	
SIGNATURE	Signature, lyped or printed name of registered age	and and the it popularities (MO	N. Donievan	Agent signature requi	irod Javas reinsterno)	DATE		
12.		D DIRECTORS	1 13.	Agent aig to ore rego	ADDITIONS/CHANGES TO OFFIC		DRS IN 12	
TITLE	P	DELFTE 1.1"		tl		Change		
NAME	MOCRACKEN P. SCOTT		1.2 NA	ME				
STREET ADDRESS	1425 18 AVENUE S.W. VERO BEACH FL		1.3 \$1	REET ADDRESS				
CITY-ST-ZIP				Y-ST-ZIP				
TITLE	MACCONNELL, THOMAS C		2 1 70			Change	e [] Addition	
NAME			2.2 N/	1				
STREET ADDRESS	VERO BEACH FL			REET ADDRESS				
CITY-ST-ZIP TITLE				4 CIIY - S1 - ZIP Change		Addition		
NAME			3 2 NA					
STREET ADDRESS			3351	RELI ADDRESS				
ARV OF MID			3.4 C	1Y-\$1-ZIP				
	prttife		4.1 10			☐ Change	Addition	
NAME ·			4. 2 N	(
STREET ADDRESS			-	REET ADDRESS				
CITY-ST-ZIP TITLE		DELETE	4.4 C) 5.1 Ti	IY-SI-ZIP		Change	Addition	
NAME		La Direct	5.2 N/			ET CHANGE	, LI MODRIUII	
STREET ADDRESS			- 1	REE1 ADDRESS				
CITY-ST-ZIP				IY-S1-ZIP				
TITLE	DELETE		6.1 (1)	·····		Change	Addition	
NAME			6.2 N/	į				
STREET ADDRESS			63\$1	RELEADDRESS				
CITY-ST-ZIP			6.4 C/	Y-ST-ZIP				

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.