

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000151552

FILED
Jan 15, 2007
Secretary of State

Entity Name: PARAGON-LERMAN CORP.

Current Principal Place of Business:

4731 GENOA DR
AMELIA ISLAND, FL 32034

New Principal Place of Business:

4732 GENOA DR
AMELIA ISLAND, FL 32034

Current Mailing Address:

4731 GENOA DR
AMELIA ISLAND, FL 32034

New Mailing Address:

4732 GENOA DR
AMELIA ISLAND, FL 32034

FEI Number: 31-1274697

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, J. ATWOOD III
5070 NORTH HIGHWAY
A-1-A, SUITE 200
VERO BEACH, FL 32963 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: LERMAN, JEWELL
Address: 4732 GENOA DR
City-St-Zip: AMELIA ISLAND, FL 32034

Title: VTD () Delete
Name: LERMAN, RON
Address: 4732 GENOA DR
City-St-Zip: AMELIA ISLAND, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEWELL A. LERMAN

PRES

01/15/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date