

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000031773

FILED
Jan 27, 2004
Secretary of State

Entity Name: PARAGON INSURANCE SERVICE, INC.

Current Principal Place of Business:

8424 4TH STREET N
STE G
SAINT PETERSBURG, FL 33702

New Principal Place of Business:

Current Mailing Address:

P O BOX 20677
ST. PETERSBURG, FL 33742

New Mailing Address:

8424 4TH STREET N
G
ST. PETERSBURG, FL 33702

FEI Number: 59-3240195

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, G
8424 4TH STREET N STE G
SAINT PETERSBURG, FL 33702

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: P () Delete
Name: MOORE, GORDON S., II, I
Address: P O BOX 20677
City-St-Zip: ST. PETERSBURG, FL 33742

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOORE, GORDON,
Address: 8424 4TH STREET N, SUITE G
City-St-Zip: ST. PETERSBURG, FL 33742

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GORDON MOORE

P

01/27/2004

Electronic Signature of Signing Officer or Director

_____ Date