

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 03, 2004 8:00 am**  
**Secretary of State**

03-03-2004 90009 006 \*\*\*150.00

**DOCUMENT # F03000000221**

1. Entity Name

PARAGON ASSOCIATES, INC.



Principal Place of Business

386 EMERALD BAY CIRCLE G-2  
NAPLES FL 34110

Mailing Address

PO BOX 110279  
NAPLES FL 34108

2. Principal Place of Business

386 Emerald Bay Circle G-2

3. Mailing Address

PO Box 110279

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Naples FL

City & State

Naples FL

Zip  
34110

Country  
US

Zip  
34108

Country  
US

4. FEI Number

54-1180300

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BUERGER, HELGA B  
386 EMERALD BAY CIRCLE G-2  
NAPLES FL 34110

7. Name and Address of New Registered Agent

Name

Same

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Helga B Buerger

2/27/04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE CPT President ☐ Delete  
NAME BUERGER, HELGA  
STREET ADDRESS PO BOX 110279  
CITY-ST-ZIP NAPLES FL 34108

TITLE VCVP ☐ Delete  
NAME FAGG, DUANE R  
STREET ADDRESS PO BOX 110279  
CITY-ST-ZIP NAPLES FL 34108

TITLE S ☒ Delete  
NAME FAGG, DUANE R -  
STREET ADDRESS PO BOX 110279  
CITY-ST-ZIP NAPLES FL 34108

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition  
NAME Buerger, Helga  
STREET ADDRESS PO Box 110279 / 386 Emerald Bay Circle G-2  
CITY-ST-ZIP Naples FL 34108

TITLE VP and S ☐ Change ☐ Addition  
NAME Fagg, Duane  
STREET ADDRESS 386 Emerald Bay Circle G-2  
CITY-ST-ZIP Naples, FL 34110

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Helga B Buerger Helga B Buerger President 2/27/04 703 821 1014

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #