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FILED
May 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000003127 (5)

1. Corporation Name

PARAGON ACCEPTANCE CORPORATION



Principal Place of Business

27405 PUERTA REAL, SUITE 200
MISSION VIEJO CA 92691

Mailing Address

27405 PUERTA REAL, SUITE 200
MISSION VIEJO CA 92691

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/20/1996

4. FEI Number

33-0653501

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
CEOP
LAMONT, DENNIS D
STREET ADDRESS
27405 PUERTA REAL, SUITE 200
CITY-ST-ZIP
MISSION VIEJO CA 92691

TITLE ☐ DELETE

NAME
V
BRENNAN, MARTIN J
STREET ADDRESS
27405 PUERTA REAL, SUITE 200
CITY-ST-ZIP
MISSION VIEJO CA 92691

TITLE ☐ DELETE

NAME
DV
LAMONT, MARILYN
STREET ADDRESS
200 SOUTH HANLEY, SUITE 800
CITY-ST-ZIP
CLAYTON MO 63105

TITLE ☐ DELETE

NAME
D
RAHMAN, MUHIT U
STREET ADDRESS
11111 SANTA MONICA BLVD SUITE 1127
CITY-ST-ZIP
LOS ANGELES CA 90025

TITLE ☐ DELETE

NAME
D
MCCARTHY, FREDERICK W
STREET ADDRESS
SIXTY STATE STREET, 21ST FLOOR
CITY-ST-ZIP
BOSTON MA 02109

TITLE ☐ DELETE

NAME
D
GLOUCHEVITCH, MICHEL
STREET ADDRESS
11111 SANTA MONICA BLVD SUITE 1127
CITY-ST-ZIP
LOS ANGELES CA 90025

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME
VP
JAMES E. STUBLAREC
1.3 STREET ADDRESS
27405 PUERTA REAL, SUITE 200
1.4 CITY-ST-ZIP
MISSION VIEJO, CA 92691

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME
VP
NANCY C. FERGUSON
2.3 STREET ADDRESS
200 S. HAWLEY ROAD, SUITE 800
2.4 CITY-ST-ZIP
CLAYTON, MO 63105

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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.

SIGNATURE

James E. Stublarec

4/20/98 6011248-8700

CR2E034 (10/97)