

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000003127

1. Entity Name

PARAGON ACCEPTANCE CORPORATION

FILED
Jul 18, 2000 8:00 am
Secretary of State

07-18-2000 90011 003 ***700.00

Principal Place of Business

27405 PUERTA REAL, SUITE 200
MISSION VIEJO CA 92691

Mailing Address

27405 PUERTA REAL, SUITE 200
MISSION VIEJO CA 92691-6314

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

33-0653501

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CEOP	<input type="checkbox"/> Delete
NAME	LAMONT, DENNIS D	
STREET ADDRESS	27405 PUERTA REAL, SUITE 200	
CITY-ST-ZIP	MISSION VIEJO CA 92691	
TITLE	V	<input type="checkbox"/> Delete
NAME	STUBLAREC, JAMES	
STREET ADDRESS	27405 PUERTA REAL, SUITE 200	
CITY-ST-ZIP	MISSION VIEJO CA 92691	
TITLE	DV	<input type="checkbox"/> Delete
NAME	LAMONT, MARILYN	
STREET ADDRESS	200 SOUTH HANLEY, SUITE 800	
CITY-ST-ZIP	CLAYTON MO 63105	
TITLE	D	<input type="checkbox"/> Delete
NAME	RAHMAN, MUHIT U	
STREET ADDRESS	11111 SANTA MONICA BLVD SUITE 1127	
CITY-ST-ZIP	LOS ANGELES CA 90025	
TITLE	D	<input type="checkbox"/> Delete
NAME	MCCARTHY, FREDERICK W	
STREET ADDRESS	SIXTY STATE STREET, 21ST FLOOR	
CITY-ST-ZIP	BOSTON MA 02109	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GLOUCHEVITCH, MICHEL	
STREET ADDRESS	11111 SANTA MONICA BLVD SUITE 1127	
CITY-ST-ZIP	LOS ANGELES CA 90025	

TITLE	PRESIDENT / CEO / DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GANNON, MARILYN	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	8550 WILLOW RUN COURT	
CITY-ST-ZIP	CINCINNATI, OH 45243	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	28 STATE STREET, 31TH FLOOR	
CITY-ST-ZIP	BOSTON, MA 02109	
TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MICHAEL FAWCETT	
STREET ADDRESS	251 PALM WAY, SUITE 303	
CITY-ST-ZIP	PALM BEACH, FL 33480	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SECRETARY

1/25/00

Date

314-719-1563

Daytime Phone #

CR2E034 (9/99)

Attachment
D# F600W3127
DW 71396

PARAGON ACCEPTANCE CORPORATION

4. NAMES AND BUSINESS OR RESIDENCE ADDRESSES OF BOARD OF DIRECTORS: (CON'TD)

DIRECTOR DAN DOYLE
STREET/RT 75 FEDERAL STREET, 18TH FLOOR
CITY/STATE/ZIP BOSTON, MA 02110

DIRECTOR STEPHEN GREEN
STREET/RT 105 ROWAYTON AVENUE
CITY/STATE/ZIP ROWAYTON, CT 08653

DIRECTOR MICHAEL LEE
STREET/RT 44 MONTGOMERY ST., SUITE 4200
CITY/STATE/ZIP SAN FRANCISCO, CA 94104