

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 24 AM 11:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L54132

(0)

1. Corporation Name

PARAGON LOCOMOTION, INC.

Principal Place of Business

1450 S. DIXIE HWY
BOCA RATON FL 33432

Mailing Address

1450 S. DIXIE HWY
BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/27/1990

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0252026

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITHER, ROBERT M JR
% WORRELL ENTERPRISES, INC.
140 S. DIXIE HWY.
BOCA RATON FL 33432

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP
NAME	WORRELL, THOMAS E., JR.
STREET ADDRESS	1450 S. DIXIE HWY.
CITY - ST - ZIP	BOCA RATON FL
TITLE	DV
NAME	FREAKLEY, EDWIN M.
STREET ADDRESS	1450 S. DIXIE HWY.
CITY - ST - ZIP	BOCA RATON FL
TITLE	S
NAME	WORRELL, ODETTE A.
STREET ADDRESS	1450 S. DIXIE HWY.
CITY - ST - ZIP	BOCA RATON FL
TITLE	DVT
NAME	SMITHER, ROBERT M., JR.
STREET ADDRESS	1450 S. DIXIE HWY.
CITY - ST - ZIP	BOCA RATON FL
TITLE	VAS
NAME	OLSEN, SUGAN
STREET ADDRESS	1450 S. DIXIE HWY.
CITY - ST - ZIP	BOCA RATON FL
TITLE	AT
NAME	WINTZER, WILLIAM R
STREET ADDRESS	1450 S. DIXIE HWY.
CITY - ST - ZIP	BOCA RATON FL

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	☒ Change ☐ Addition
52 NAME	GOODYEAR, KIM
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

William R. Wintzer WILLIAM R. WINTZER 4/18/95 (407) 338-3298

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

(Phone Number)