## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED May 04, 2001 8:00 am Secretary of State DOCUMENT # **P93000010075** PARAGON ROOFING, INC. 05-04-2001 90141 020 \*\*\*150.00 Principal Place of Business Mailing Address 6350 S BABCOCK ST 2360 HUNTER LANE PALM BAY FL 32909 Secontidi MALABAR FL 32950 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3164016 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CAUDILL, VALERIE B Street Address (P.O. Box Number is Not Acceptable) 2360 HUNTER LANE MALABAR FL 32950 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the statement for the purpose of changing its registered office or registered agent, or both, in the statement for the purpose of changing its registered office or registered agent, or both, in the statement for the purpose of changing its registered office or registered agent, or both, in the statement for the purpose of changing its registered office or registered agent, or both, in the statement for the purpose of changing its registered office or registered agent, or both, in the statement for the purpose of changing its registered office or registered agent, or both, in the statement for the purpose of changing its registered office or registered agent, or both, in the statement for the purpose of changing its registered office or registered agent, or both, in the statement for the purpose of changing its registered of the statement for the purpose of changing its registered of the statement for the statem SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE □ Delete TITLE ☐ Addition Change NAME CAUDILL, JOHN A NAME STREET ADDRESS 2360 HUNTER LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>M</u>alabar Fl TITLE DPTS Delete TITLE Change ☐ Addition NAME CAUDILL, VALERIE B NAME STREET ADDRESS 2360 HUNTER LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MALABAR FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME CAUDILL, KENNETH G. STREET ADDRESS 1928 AGORA CIR 106 SE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM BAY FL 32909 TITLE ☐ Delete Change ☐ Addition NAME SLAUGHTER, DAVID NAME STREET ADDRESS 1400 GIBBS ST STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MELBOURNE FL 32901 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP