

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000016069

FILED
Jul 19, 2006
Secretary of State

Entity Name: PARAGON PROPERTY MANAGEMENT OF SW FLORIDA, INC.

Current Principal Place of Business:

6371 ARC WAY
STE 2
FORT MYERS, FL 33912 US

New Principal Place of Business:

Current Mailing Address:

6371 ARC WAY
STE 2
FORT MYERS, FL 33912 US

New Mailing Address:

FEI Number: 65-0391151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WORKMAN, DAVID J
6371-2 ARC WAY
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

WORKMAN, LUANN S
6371-2 ARC WAY
FORT MYERS, FL 33912 US

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: LUANN S WORKMAN

07/19/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WORKMAN, DAVID J
Address: 16330 FAIRWAY WOODS DR., #1703
City-St-Zip: FORT MYERS, FL

Title: VPD (X) Delete
Name: WORKMAN, LUANN
Address: 16330 FAIRWAY WOODS DR
City-St-Zip: FT. MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WORKMAN, LUANN S
Address: 6371-2 ARC WAY
City-St-Zip: FORT MYERS, FL 33912

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUANN S WORKMAN

P

07/19/2006

Electronic Signature of Signing Officer or Director

Date