


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # **P95000055640 (3)**
1. Corporation Name
PARADIGM 21, INC.

Principal Place of Business 7717 RED CEDAR LANE SARASOTA FL 34241 US	Mailing Address 7717 RED CEDAR LANE SARASOTA FL 34241 US
--	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 PO BOX 49946 Suite, Apt. #, etc. 22		2a. Mailing Address 26 PO BOX 49946 Suite, Apt. #, etc. 27		3. Date Incorporated or Qualified 07/17/1995	
City & State 23 SARASOTA FL		City & State 28 SARASOTA FL		4. FEI Number 65-0598621 Applied For <input type="checkbox"/> Not Applicable	
Zip 24 34230		Country 25		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State 23 SARASOTA FL		City & State 28 SARASOTA FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip 24 34230		Country 25		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent RETTIG, JESSE E 7717 RED CEDAR LANE SARASOTA FL 34241				10. Name and Address of New Registered Agent 81 Name RALPH H. RADTKE 82 Street Address (P.O. Box Number is Not Acceptable) 1729 LOMA LINDA ST 83 84 City SARASOTA FL 85 Zip Code 34239			
---	--	--	--	--	--	--	--

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 Ralph H. Radtke **RALPH H. RADTKE** **PRES.** **3-7-98**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE	V/T/D		
NAME	RETTIG, JESSE E			1.2 NAME	JESSE E. RETTIG		
STREET ADDRESS	705 BAYSHORE ROAD			1.3 STREET ADDRESS	7717 RED CEDAR LN		
CITY-ST-ZIP	NOKOMIS FL 34275			1.4 CITY-ST-ZIP	SARASOTA FL 34241		
TITLE		<input type="checkbox"/> DELETE		2.1 TITLE	V/S/D		
NAME				2.2 NAME	ROBERT K. READY		
STREET ADDRESS				2.3 STREET ADDRESS	988 BLVD. OF THE ARTS SUITE 1916		
CITY-ST-ZIP				2.4 CITY-ST-ZIP	SARASOTA FL 34236		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE	P/D		
NAME				3.2 NAME	RALPH H. RADTKE		
STREET ADDRESS				3.3 STREET ADDRESS	1729 LOMA LINDA ST.		
CITY-ST-ZIP				3.4 CITY-ST-ZIP	SARASOTA FL 34239		
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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: Ralph H. Radtke **RALPH H. RADTKE** **3-7-98** **(941) 953-9482**

CR2E034 (10/97)