

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90061 025 ***150.00

DOCUMENT # P95000055640

1. Corporation Name
PARADIGM 21, INC.

Principal Place of Business
POST OFFICE BOX 2161
SARASOTA FL 34230
US

Mailing Address
POST OFFICE BOX 2161
SARASOTA FL 34230
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/17/1995

4. FEI Number
65-0598621
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business
21 Post Office Box 2161
Suite, Apt. #, etc.

2a. Mailing Address
26 Post Office Box 2161
Suite, Apt. #, etc.

23 City & State
Sarasota FL
24 Zip
34236
25 Country
Sarasota

28 City & State
Sarasota FL
29 Zip
34236
30 Country
Sarasota

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~RADTKE, RALPH H~~
~~1729 LOMA LINDA STREET~~
~~SARASOTA FL 34230~~

READY, R. K.
988 Blvd of the Arts #1916
Sarasota FL 34236

81 Name
R. K. READY
82 Street Address (P.O. Box Number is Not Acceptable)
988 Blvd of the Arts #1916
83
84 City
Sarasota
85 Zip Code
FL 34236

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 of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/28/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VTD
RETTIG, JESSE E
7717 RED CEDAR LN
SARASOTA FL 34241

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
READY, ROBERT K
988 BLVD OF THE ARTS STE 1916
SARASOTA FL 34236

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
PD
READY, R. K.
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
~~PD~~
~~RADTKE, RALPH H~~
~~1729 LOMA LINDA STREET~~
~~SARASOTA FL 34230~~

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE: R. K. Ready

Date

Daytime Phone #

4/28/99

CR2E034 (1/98)