

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

04 APR 22 AM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000032518

1. Entity Name
PALADIN INVESTMENT GROUP, INC.



Principal Place of Business
1750 HUTCHINSON FERRY RD
QUINCY, FL 32352

Mailing Address
BOX 470
QUINCY, FL 32353



04222004 No Chg-P CR2E034 (10/03) **04**

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1952357	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WRIGHT, MICHAEL
1750 HUTCHINSON FERRY RD
QUINCY, FL 32352

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST WRIGHT, MICHAEL 1750 HUTCHINSON FERRY RD #470 QUINCY, FL 323530470
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael Wright **Michael WRIGHT** 4/22/04 850 856 5274
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #