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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Mar 30 1998 8:00am Secretary of State

Ĺ	1998 DIVISION OF CORPORATIONS						٦		
DOCUMENT # P9700077094 (5) PARAGON CAPITAL MANAGEMENT, INC.									
									H I I I I I I I I I I I I I I I I I I I
Principal Place	e of Business	Mailing Address	····			L LOUDHARDI. 190. (Gribs Donit Odes). Odesis	EDLIN OBINI HODA		II BIBI IBBI
6550 RIDGEWOOD DR. 6550 RIDGEWOOD DR.					ĺ				
NAPLES FL 34	4106	NAPLES FL 34108				DO NOT WRI	TE IN THIS S	PACE	
					[:	Date Incorporated or Qualified	1		
2. Principal Pl	2. Principal Place of Business 2e, Mailing Address			<del>-</del>		09/03/1997 • FE! Number		- I TAC	plied For
21						59-3467839		_ <del></del>	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<b>-</b>			5. Certificate of Status Desired		\$8.75 A	
City & State	City & State City & State					8. Election Campaign Financing		\$5.00	
23	28					Trust Fund Contribution		t bebbA	
Zip	Country	Ζιρ	Countr	у	1	<ol> <li>This corporation owes or has personal Property Tax due Jui</li> </ol>			angibłe <b>≹</b> No
24	9. Name and Address of Current		30			D. Name and Address of New I			XIVO
WE	nt <b>ze</b> l, willett e Jr	<del></del>	81	Name					
6550 RIDGEWOOD DR.			82	Street	Address	ress (P.O. Box Number is Not Acceptable)			
NAI	PLES FL 34108		83	ļ					
			L	L				T221 57 7	
			84	) '			FL	85 Zip (	)
11. Pursuant t	to the provisions of Sections 607.0502 egistered agent, or both, in the State or familiar with, and accept the obliga	2 and 607, 1508, Florida Statute of Florida, Such change was a	es, the above	е-патеd v the corp	corporat	ion submits this statement for the board of directors. I hereby acc	purpose of	changing its	s registered registered
agent. I ar	m familiar with, and accept the obliga	itions of, Section 607.0505, Flo	rida Statute	S.		, ,			
SIGNATURE .	Signature, typed or printed name of registered age:	nt and title if applicable (NOTE	: Registered Ag	ent signature	required wh	en reinstating)	DATE		
12.	OFFICERS AND	<del></del>	13.			ADDITIONS/CHANGES TO OFF	ICERS AND		
TITLE NAME	d Wentzel, Willett e Jr	☐ DELETE	1.1 TITLE 1.2 NAME		P		ļ	Change	Addition
STREET ADDRESS	6550 RIDGEWOOD DR.			T ADDRESS					ľ
CITY-ST-ZIP	NAPLES FL 34108		1.4 CITY-	ST-ZIP					
TITLE	Diana Wentzel	☐ DELETE	2.1 TITLE		8/1	r /D		Change	Addition
NAME STREET ADDRESS	6550 Ridgewood	Drive	2.2 NAME	I ADDRESS	J , .	י לי			ĺ
CITY-ST-ZIP	Naples, Florida	a 34108	2.4 CITY-	1					Ì
TITLE		DELETE	3.1 TITLE	·				Change	Addition
NAME			3.2 NAME						
STREET ADORESS			3.3 STREE*	r address					1
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE	51-ZIF		<del></del>		Change	Addition
NAME			4. 2 NAME	j					
STREET ADDRESS			4.3 STREE	T ADDRESS	i				ļ
CITY-ST-ZIP_		DELETE	4.4 CITY-1	ST-ZIP	ļ			Change	Addition
TITLE NAME		☐ DECEIE	5.1 TITLE 5.2 NAME	1				Change	L Addition
STREET ADDRESS				FADORESS					
CITY-ST-ZIP			5.4 CITY-1						}
TITLE		☐ DELETE	6.1 TITLE					Change	Addition
NAME			6.2 NAME						
STREET ADDRESS				ADDRESS					İ
CITY-ST-ZIP	ertify that the information supplied wil	th this filing does not qualify for	6.4 CITY-:		d in Sect	ion 119.07(3)(i), Florida Statutes.	I further cer	tify 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 chapted, or on an attachment with an address.

Willett E. Wentzel, Jr

3-15-98