2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000042936

Entity Name: PARAGON HOMEFUNDING, INC.

FILED Feb 02, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

670 N. ORLANDO AVENUE., STE 202 MAITLAND, FL 32751

Current Mailing Address: New Mailing Address:

670 N. ORLANDO AVENUE., STE 202 MAITLAND, FL 32751

FEI Number: 59-3513687 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PARNELL, EDWARD
321 BARCLAY AVENUE
ALTAMONTE SPRINGS, FL 32701 US

PARNELL, EDWARD
1603 THE OAKS DRIVE
MAITLAND, FL 32751 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: 02/02/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name:PARNELL, EDWARDName:PARNELL, EDWARDAddress:321 BARCLAY AVENUEAddress:321 BARCLAY AVENUE

City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: VP () Delete Title: VP (X) Change () Addition

Name:THOMAS, CLARISSA MName:THOMAS, CLARISSA MAddress:9528 CANNON DRIVEAddress:2510 WESTMINSTER TERRACE

City-St-Zip: ORLANDO, FL 32817 City-St-Zip: OVIEDO, FL 32765 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CLARISSA THOMAS VP 02/02/2002