APR.25'2003 10:36 4073392521 WOLFE YOUNG COMPANY

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May 02, 2003 8:00 am
Secretary of State
05-02-2003 90748 001 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000042936

1. Entity Name
PARAGON HOMEFUNDING, INC.

90123450

Principal Place of Business	Mailing Address
670 N. ORLANDO AVENUE., STE 202, MAITLAND, FL 32751	670 N. ORLANDO AVENUE., STE 202, MAITLAND, FL 32751

2. Principal Place of Business	3. Mailing Address
670 N Orlando Ave	
Suite, Apt. #, etc. Ste 1003	Suite, Apt. #, etc.
City & State Maitland Fl.	City & State
Zip 32751 Country Orange	Zip / Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3613087 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
PARNELL, EDWARD
1802 THE OAKS DRIVE
MAITLAND, FL 32701

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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: Edward Parnell 4/25/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

[redacted]

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PARNELL, EDWARD 321 BARCLAY AVENUE ALTAMONTE SPRINGS, FL 32701 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP THOMAS, CLARISSA M 2510 WESTMINSTER TERRACE OVIEDO, FL 32766 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

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: Edward Parnell President 4/25/03 407-599-6888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #