

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000038453

FILED
Apr 20, 2005
Secretary of State

Entity Name: PARAGON UNDERWRITERS, INC.

Current Principal Place of Business:

1020 N ORLANDO AVE
SUITE 200
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

1020 N ORLANDO AVE
SUITE 200
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 59-3578581 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEUKAMM, MICHAEL E
201 E. PINE ST., STE. 1200
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BREEN, JAMES
Address: 465 CHICKEE CT.
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: JAMES, TERRY
Address: 1831 S. SUMMERLIN AVE.
City-St-Zip: ORLANDO, FL 32806

Title: D () Delete
Name: SIBLEY, B. CRAIG
Address: 2521 DELORAINA TRAIL
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BREEN, JAMES
Address: 3396 STERLING RIDGE CT
City-St-Zip: LONGWOOD, FL 32779

Title: D (X) Change () Addition
Name: JAMES, TERRY
Address: 438 E GRANT STREET
City-St-Zip: ORLANDO, FL 32806

Title: D (X) Change () Addition
Name: SIBLEY, B. CRAIG
Address: 2035 KING ARTHUR CIRCLE
City-St-Zip: MAITLAND, FL 32751

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: JAMES H BREEN

D

04/20/2005

Electronic Signature of Signing Officer or Director

_____ Date