

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000103893

FILED  
Jun 06, 2002 8:00 AM  
Secretary of State

Entity Name: PARAGON MORTGAGE ADVISORS, INC.

## Current Principal Place of Business:

745 US HWY 1  
SUITE 307  
NORTH PALM BEACH, FL 33408

## New Principal Place of Business:

784 US HWY 1  
SUITE 18  
NORTH PALM BEACH, FL 33408

## Current Mailing Address:

745 US HWY 1  
SUITE 307  
NORTH PALM BEACH, FL 33408

## New Mailing Address:

784 US HWY 1  
SUITE 18  
NORTH PALM BEACH, FL 33408

FEI Number: 65-0964145

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JACOBS, BRIAN  
820 SANDTREE DR  
PALM BEACH GARDENS, FL 33403

## 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

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:

Title: PRES ( ) Delete  
Name: JACOBS, BRIAN S PRESIDE  
Address: 820 SANDTREE DR.  
City-St-Zip: PALM BEACH GARDENS, FL 33403 US

Title: SEC (X) Delete  
Name: CATHERINE, JACOBS D SECRETR  
Address: 400 A N. FLAGLER DR.  
City-St-Zip: WEST PALM BEACH, FL 33403 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BRIAN JACOBS

PRES

06/06/2002

Electronic Signature of Signing Officer or Director

Date