

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000103893

FILED
Apr 27, 2009
Secretary of State

Entity Name: PARAGON MORTGAGE ADVISORS, INC.

Current Principal Place of Business:

130 S. MASSACHUSETTS AVE.
SUITE 701
LAKELAND, FL 33801

New Principal Place of Business:

130 S. MASSACHUSETTS AVE.
SUITE 211
LAKELAND, FL 33801

Current Mailing Address:

130 S. MASSACHUSETTS AVE.
SUITE 701
LAKELAND, FL 33801

New Mailing Address:

850 BAYWAY BLVD
CLEARWATER, FL 33767

FEI Number: 65-0964145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLINS, WILLIAM PRES
2106 SW HYACINTH ST
PORT SAINT LUCIE, FL 34953 US

Name and Address of New Registered Agent:

COLLINS, WILLIAM PRES
9997 SW STONEGATE DR
PORT SAINT LUCIE, FL 34987 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:

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: COLLINS, WILLIAM J
Address: 2106 SW HYACINTH ST
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: VP () Delete
Name: COLLINS, IAN
Address: 130 S. MASSACHUSETTS AVE. SUITE 701
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: COLLINS, WILLIAM J
Address: 9997 SW STONEGATE DR
City-St-Zip: PORT SAINT LUCIE, FL 34987 US

Title: VP (X) Change () Addition
Name: COLLINS, IAN
Address: 850 BAYWAY BLVD
City-St-Zip: CLEARWATER, FL 33767

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: IAN COLLINS

VP

04/27/2009

Electronic Signature of Signing Officer or Director

Date