FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED Feb 27 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (6)PARAGON WATER SYSTEMS, INC. Principal Place of Business Mailing Address 14001 63RD WAY 14001 63RD WAY CLEARWATER. FL 34620 CLEARWATER, FL 34620 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/07/1992 Applied For 2a. Mailing Address 4. FEI Number 2. Principal Place of Business 59-3121209 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 Country Žιρ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 29 30 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MICHAELS, THOMAS O. 1370 PINEHURST ROAD Street Address (P.O. Box Number is Not Acceptable) DUNEDIN, FL 34698 83 Zip Code 84 City 85 11. Pursuant to the provisions of Sections 607.05.02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stgnature, typed or profest name of registered agent and life if applicable (NOTE: Angistered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ___ Addition Change DELETE 1 1 TITLE TITLE STOVER, MICHAEL J. 1.2 NAME NAME 2175 CHAPPARRAL WAY 13 STREET ADDRESS STREET ADDRESS **DUNEDIN FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE KANE, JOHN E. 2.2 NAME NAME 2784 WESTCHESTER DRIVE N 2.3 STREET ADDRESS STREET ADDRESS CLEARWATER FL 2 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE NAME DOUGLAS, JOHN 3.2 NAME 1000 COVE CAY DR. 7E **420 TIMBER LANE** 3.3 STREET ADDRESS STREET ADDRESS CIEARWATER, FL 33760 PALM HARBOR FL 3.4. CITY - ST - 2IP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CiTY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5 1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP ☐ Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME

6 3 STREET ADDRESS

hes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information it is true and accurate and that my significant shall have the same legal effect as if made under oath; that I am an empowered to execute this report as equired by Chapter 607, Florida Statutes; and that my name appears in

6.4 CITY - ST - ZIP

STREET ADDRESS

SIGNATURE: _ _

14. Thereby certify that the information supplied with this filing indicated on this annual report or supplemental annual re-officer or director of the corporation or the regioner or try-Block 12 or Block 13 if changed, or on an attachment with

CITY - ST - ZIP