

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000002726

**Entity Name:** PARAGON SYSTEMS, INC.**Current Principal Place of Business:**13900 LINCOLN PARK DRIVE  
SUITE 370  
HERNDON, VA 20171**Current Mailing Address:**LAURA POLTE; LEGAL DEPT  
4330 PARK TERRACE DRIVE  
WESTLAKE VILLAGE, CA 91361 US**FEI Number:** 63-0937443**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            TREASURER  
Name            HERNY, WILLIAM A  
Address        13900 LINCOLN PARK DRIVE  
                 SUITE 300  
City-State-Zip: HERNDON VA 20171

Title            SECRETARY  
Name            HOWELL, MARK B  
Address        13900 LINCOLN PARK DRIVE  
                 SUITE 300  
City-State-Zip: HERNDON VA 20171

Title            DIRECTOR  
Name            MOTSEK, GARY J  
Address        13900 LINCOLN PARK DRIVE  
City-State-Zip: HERNDON VA 20171

Title            DIRECTOR  
Name            MCALLISTER, SINGLETON B  
Address        13900 LINCOLN PARK DRIVE  
                 SUITE 370  
City-State-Zip: HERNDON VA 20171

Title            PRESIDENT  
Name            KACIBAN, JR., LESLIE  
Address        13900 LINCOLN PARK DRIVE  
                 SUITE 300  
City-State-Zip: HERNDON VA 20171

Title            DIRECTOR  
Name            ROMAN, MARK J  
Address        13900 LINCOLN PARK DRIVE  
                 SUITE 370  
City-State-Zip: HERNDON VA 20171

Title            DIRECTOR  
Name            FREEZE, JAMES E  
Address        13900 LINCOLN PARK DRIVE  
                 SUITE 370  
City-State-Zip: HERNDON VA 20171

Title            DIRECTOR  
Name            SHULL, DAVID A  
Address        13900 LINCOLN PARK DRIVE,  
                 SUITE 370  
City-State-Zip: HERNDON VA 20171

*I hereby 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 all other like empowered.*

**SIGNATURE:** MARK B HOWELL**SECRETARY****04/28/2021**

Electronic Signature of Signing Officer/Director Detail

Date