2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 459265

1, Entity Name
PATTERSON & HARMON, P.A.



FILED
Jul 09, 2004 08:00 AM
Secretary of State

Principal Place of Business

665 S.E. 10TH ST.

DEERFIELD BEACH, FL 33441-5684

Mailing Address

665 S.E. 10TH ST.

DEERFIELD BEACH, FL 33441-5684



DO NOT WRITE IN THIS SPACE

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07062004	No Cha-P	CR2E034 (10/03)	

4. FEI Number Applied For 59-1546283 - Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PATTERSON, GEORGE A. 665 SOUTHEAST TENTH ST. DEERFIELD BEACH, FL

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE Signature, typed or privided name of registered agent and this it applicable. (NOTE: Registered Agent signature required when refusating) — DATE							
	LE NOW!!! FEE IS \$150.00 ue by September 8, 2004	S. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10.	OFFICERS AND DIRE	cross	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
TITLE NAME STREET AGDRESS CRY-ST-ZIP	PTD PATTERSON, GEORGE A 1528 SE 12TH COURT DEERFIELD BCH, FL			H0000164785			
TITLE NAME STREET ADDRESS CRY-ST-ZIP	S PATTERSON, GEORGE A 1528 S E 12TH COURT DEERFIELD BCH, FL			000000164785 07/09/04-80003-019 150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			¹IN ¹	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				4 ∨ .			
TITLE NAME STREET ADDRESS CRY-ST-JIP				;=			
12. I hereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the faceiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an abackground with an address, with all other like empowered.							