

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L89169

**FILED**  
**Feb 25, 2014**  
**Secretary of State**  
**CC9246009560**

**Entity Name:** PATTI AND MERRITT ENTERPRISES, INC.

**Current Principal Place of Business:**

610 SOUTH C ST.  
PENSACOLA, FL 32501

**Current Mailing Address:**

610 SOUTH C ST.  
PENSACOLA, FL 32501 US

**FEI Number:** 59-3019602

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MERRITT, JOSIE P.  
610 SOUTH  
PENSACOLA, FL 32501 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 PSD  
Name MERRITT, JOSIE PATTI  
Address 6971 HEATHER OAKS DR.  
City-State-Zip: PENSACOLA FL 32506

Title D  
Name MERRITT, VALERIE M.  
Address 6971 HEATHER OAKS DR.  
City-State-Zip: PENSACOLA FL 32506

Title D  
Name MERRITT, CHARLES E. JR.  
Address 6971 HEATHER OAKS DR.  
City-State-Zip: PENSACOLA FL 32506

Title DT  
Name SALVATORE, PATANE  
Address 5644 COLINWOODS DR  
City-State-Zip: MILTON FL 32583

*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:** JOSIE P MERRITT

**PRESIDENT**

**02/25/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date