2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 213946

Entity Name: PATRONIS BROTHERS INC

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5551 NORTH LAGOON DRIVE PANAMA CITY BEACH, FL 324087911 US **Current Mailing Address: New Mailing Address:** 5551 NORTH LAGOON DRIVE PANAMA CITY BEACH, FL 32407 US FEI Number: 59-6033894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PATRONIS, JOHNNY T PRES 5551 N. LAGOON DR. PANAMA CITY BEACH, FL 32407 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition PATRONIS, JOHNNY T PRES Name: Name: 5551 NORTH LAGOON DRIVE Address: Address: City-St-Zip: PANAMA CITY BEACH, FL 32407 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: PATRONIS, JIMMY T. SR. PRES Name: 5551 NORTH LAGOON DRIVE Address: Address: PANAMA CITY BEACH, FL 32408 US City-St-Zip: City-St-Zip: Title: Title: VD () Delete () Change () Addition PATRONIS, JIMMY T. JR Name: Name: 5551 N LAGOON DR Address: Address: City-St-Zip: PANAMA CITY BEACH, FL 32408 US City-St-Zip: Title: VD () Delete Title: () Change () Addition PATRONIS, YONNIE J Name: Name: Address: 5551 N. LAGOON DRIVE Address: City-St-Zip: PANAMA CITY BEACH, FL 32408 US City-St-Zip: Title: VD Title: () Delete () Change () Addition PATRONIS, NICHOLAS J Name: Name: 5551 N. LAGOON DRIVE Address: Address: PANAMA CITY BEACH, FL 32408 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition PATRONIS, THEO J Name: Name: 5551 N LAGOON DR Address: Address: City-St-Zip: City-St-Zip: PANAMA CITY BEACH, FL 32408 US

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: JOHN PATRONIS VP 04/16/2009