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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 439485

PATTON GROVES, INC.

**FILED** Feb 10, 1999 8:00am **Secretary of State** 

02-10-1999 90010 021 \*\*\*150.00



Malling Address SpallurEnceSts DR. Address DR. Addr		•						
HAMES CITY FL 33844  US  2. Principal Place of Business 2. A. Mailing Address 3. Date Incorporated or Qualified 11/07/1973  2. Principal Place of Business 2. A. Mailing Address 3. Date Incorporated or Qualified 11/07/1973  3. Date Incorporated or Qualified 11/07/1973  4. FEI Number 59-1502777  Not Ag 59-1502777  Not Ag 6-1502777  Not Ag 6-1502777  Not Ag 7-1502777  Not Ag 7-150277  Not Ag 7-1502777  Not Ag 7-1502777  Not Ag 7-150277  Not Ag 7-1502777  Not Ag 7-1502777  Not Ag 7-150277  Not	ricipal Pla	ce of Business	Mailing Address	•		E IDDRÁIL GADDR AILIGE IDAIL BYRDÁI (BIDA BIRA DIRA DIRA	teri ereni etant erest erett fr	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number   Applied	INT SICE SOUS SILVERCREST DR. SOUS SILVERCREST DR. HAINES CITY FL 33844 HAINES CITY FL 33844					DO NOT WRITE IN THIS SPACE		
Suite, Apt. #, etc.    Suite, Apt. #, etc.	1							
Suite, Apt. #, etc.    Suite, Apt. #, etc.	2. Principal !	Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
Suite, Apt. #, etc.    Suite, Apt. #, etc.	21		26			59-1502777	Not Applicab	
City & State  City & Country  Cou	Suite, Apt	. #, etc.	Suite, Apt. #, etc.			· · · · · · <u>_</u> · ·	\$8.75 Additional	
Trust Fund Contribution Added to F.    Zip	22		27			5. Certificate of Status Desired	Fee Required	
Zip   Country   Zip   Country   Zip   Country   St. This corporation owes the current year Intangible   Personal Property Tax.   Yes   Y	<b>⊸</b> i '	ite	<del> </del> -			, , , , , , , , , , , , , , , , , , , ,	<b>\$5.00</b> May Be	
25		Country		Coun	Irv			
PATTON, FRANK J JR  10		. — ,	_ <del> </del>	<del></del>	,			
PATTON, FRANK J JR 30 SILVERCREST DR. HAINES CITY FL 33844  84 City FL 85 Zip Codi City City City City City City City Cit				30		7.0.00-0		
PATTON, FRANK J JR 30 SILVERCREST DR.  82 Street Address (P.O. Box Number is Not Acceptable)  83   84 City   FL   85 Zip Coding Size of Codin	in de		The troglator out A gorit	18	Name	The first and Address of New Registered	-gont	
B3    HAINES CITY FL 33844   83   B4    City	PAT	TON, FRANK J JR						
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 registering agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE  NAME  PATTON, WILLIAM W  12. NAME  STREET ADDRESS  CITY ST-2IP  TITLE  ST  DELETE  11. TITLE  12. NAME  13. STREET ADDRESS  CITY ST-2IP  TITLE  ST  DELETE  21. TITLE  12. NAME  PATTON, JOHN R  4158 WATERLOO CIR.  TUCKER GA 30084  24. CITY-ST-ZIP  DELETE  31. TITLE  Change  Change  Change  PATTON, FRANK J  32. NAME  33. STREET ADDRESS  30. SILVERCREST DRIVE  33. STREET ADDRESS  30. SILVERCREST DRIVE  33. STREET ADDRESS  34. CITY-ST-ZIP  Change  Change  Change  Change  ALL CITY-ST-ZIP	30	SILVERCREST DR.		1	Street Add	ress (P.O. Box Number is Not Acceptable)	I .	
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registred 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 registregater at am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE  NAME  PATTON, WILLIAM W  12. NAME  STREET ADDRESS  CITY ST. ZIP  DELETE  13. STREET ADDRESS  CITY ST. ZIP  DELETE  21. TITLE  12. TITLE  13. STREET ADDRESS  CITY ST. ZIP  DELETE  21. TITLE  14. CITY ST. ZIP  DELETE  22. NAME  23. STREET ADDRESS  TUCKER GA 30084  24. CITY ST. ZIP  PATTON, FRANK J  32. NAME  PATTON, FRANK J  33. STREET ADDRESS  ANDALUSIA AL 36420  14. CITY ST. ZIP  DELETE  21. TITLE  12. Change  Change  Change  Change  PATTON, FRANK J  32. NAME  93. STREET ADDRESS  30. SILVERCREST DRIVE  43. STREET ADDRESS  30. SILVERCREST DRIVE  44. CITY ST. ZIP  ALCITY	HAI	NES CITY FL 33844		5	13	1961 (*** かいておお ま) まっしたみにからりかいか、ま かっち   1962 (*** 1977 *** 1977 *** 1977 *** 1978 *** 1978 *** 1978 *** 1978 *** 1978 *** 1978 *** 1978 *** 1978 ***	70 40 1 40 1 50 1 50 1 50 1 1 1 1 1 1 1 1 1 1 1 1	
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SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE V NAME PATTON, WILLIAM W 1.2 NAME 103 HONEYSUCKEL DR 1.3 STREET ADDRESS CITY-ST-ZIP  TITLE ST DELETE 2.1 TITLE Change PATTON, JOHN R 2.2 NAME STREET ADDRESS 4158 WATERLOO CIR. TUCKER GA 30084 DELETE 3.1 TITLE PATTON, FRANK J 3.2 NAME PATTON, FRANK J 3.3 STREET ADDRESS 3.0 SILVERCREST DRIVE HAINES CITY FL 33844 3.4 CITY-ST-ZIP  HAINES CITY FL 33844	office or	registered agent, or both, in the State	e of Florida. Such change was	authorized to	by the corporation	on's board of directors. I hereby accept the appoin	itment as registered	
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed on an attactment with an address, with all other like empowered.

SIGNATURE:

770-938-3514