## **2001 UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # 621119 1. Entity Name PATTON SOUTH CORPORATION Principal Place of Business Mailing Address 1360 MORVENWOOD ROAD 1360 MORVENWOOD ROAD JACKSONVILLE FL 32207 JACKSONVILLE FL 32207

## **FILED** Jan 30, 2001 8:00 am Secretary of State

01-30-2001 90141 010 \*\*\*150.00



2. Principal Place of Business  3. Mailing Address  5. 600 61. Pugv3) wa &C			····	)				
Suite, Apt. #, etc.  Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
Gity & Sta	te Kaniple FL	City & State		4.	FEI Number <b>59-1958647</b>	<del></del>	pplied For lot Applicable	
322	Country DUNAL	Zip	Country	5.	Certificate of Status Desired	\$8.75 Ad	lditional	
	6. Name and Address of Current Re	egistered Agent		7. 1	Name and Address of New Registered	Agent		
PATTON, ARTHUR H JR. 1360 MORVENWOOD ROAD 150			Name - Street Addres	Name Street Address (P.O. Box Number is Not Acceptable)				
JACI	KSONVILLE FL 32207		City		FL	Zip Cod	ie	
SIGNATURE	e named entity submits this statement for the statement of the statement o	5	Registered Agent signature requ		1/24/0	)		
Tax filing requirement and elects to do so. (See criteria on back)  After MAY 1, 2001  Make Check Payable			1 Fee will be \$550.00	State		_ Adde∈	00 May Be d to Fees	
11.	OFFICERS AND DI	RECTORS	12.	AD	DITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PATTON, ARTHUR H JR 1360 MORVENWOOD ROAD JACKSONVILLE FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PATTON, NANCY D. 1360 MORVENWOOD ROAD JACKSONVILLE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET AODRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
maicaled	ertify that the information supplied with this on this report or supplemental report is true potential or the receiver or truetee among the receiver or truetee among the receiver or truetee.	ie and accurate and that my	ne exemption stated in signature shall have the	Section 1 e same Ir	19.07(3)(i), Florida Statutes. I further cert egal effect as if made under oath; that I a	tify that the in	formation or director	

cute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: