


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 14, 2004 08:00 AM
Secretary of State

DOCUMENT # 728811 1. Entity Name PATIO VILLAGE CORPORATION, INC.					
Principal Place of Business 6135 66 ST NORTH ST PETERSBERG FL 33709			Mailing Address 6135 66 ST NORTH ST PETERSBERG FL 33709		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		4. FEI Number 59-1548640	
Country		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TART, LORRAINE 6135 NORTH 66TH STREET LOT 324 ST PETERBURG FL 33709				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TM DOYLE, HENRY 6135 66TH STREET N #410 SAINT PETERSBURG FL 33709	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ROOD, WALTER 6135 66TH STREET N #115 SAINT PETERSBURG FL 33709	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HOGAN, JOCELYNE 6135 66TH STREET N #318 ST PETERSBURG FL 33709	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MILLEY, PAUL 6135 66TH STREET N, #508 ST PETERSBURG FL 33709	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TAMBOER, BILL 6135 66TH STREET N, #221 ST PETERSBURG FL 33709	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD CROSSMAN, AUSTIN 6135 66TH ST., N. #409 ST PETERSBURG FL 33709	<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			SIGNATURE: <i>Henry Doyle</i> HENRY DOYLE TREASURER & MANAGER 2/10/04 (727) 546-2943		