

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F000000004066

1. Entity Name

PATRIOT DEVELOPMENT.GROUP, INC.

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 JUL -3 AM 9:32

Principal Place of Business Mailing Address  
3101 C. W. Michigan Ave. P.O. Box 730  
Pensacola, FL 32526 Nokesville, VA  
20182

2. Principal Place of Business 3. Mailing Address  
3101 W. Michivan Ave. P.O. Box 730  
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State  
Pensacola, FL Nokesville, VA

Zip Country Zip Country  
32526 USA 20182 USA

DO NOT WRITE IN THIS SPACE  
05/16/01 90265 027 \*150

4. FEI Number 54-1986523  
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

Sean Winner  
220 W. Garden St, 9th Floor  
Pensacola, FL 32501

## 7. Name and Address of New Registered Agent

Name  
J. Lofton Westmoreland  
Street Address (P.O. Box Number is Not Acceptable)  
220 W. Garden Street  
Ninth Floor  
City Pensacola FL Zip Code 32501

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.

SIGNATURE *[Signature]*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

6-16-01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete  
President  
Kenneth M. Ductor  
STREET ADDRESS  
10232 Cedar Run Drive  
CITY-ST-ZIP  
Nokesville, VA 20181

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 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 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: KENNETH M. DUCTOR *[Signature]* 6/28/01 703-791-7727  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2ED34 (11/00)