

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000001562

Entity Name: THE PATY GROUP, INC.

**FILED**  
**Mar 31, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2475 NORTHWINDS PKWY., SUITE 200  
ALPHARETTA, GA 30009

**New Principal Place of Business:**

**Current Mailing Address:**

2475 NORTHWINDS PKWY., SUITE 200  
ALPHARETTA, GA 30009

**New Mailing Address:**

FEI Number: 58-1534233

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FOWLER, DENNIS L  
14105 LAVANTE CT  
BONITA SPRINGS, FL 34135 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: CPT  
Name: FOWLER, DENNIS  
Address: 14105 LAVANTE CT  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: WVC  
Name: FOWLER, KEITH E  
Address: 14105 LAVANTE CT  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S  
Name: FOWLER, BERNADETTE  
Address: 14105 LAVANTE CT  
City-St-Zip: BONITA SPRINGS, FL 34135

I hereby 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 all other like empowered.

SIGNATURE: DENNIS FL FOWLER

PRES

03/31/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date