FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

F94000003133 (5) DOCUMENT #

PATTEN COMMUNITIES, INC.

Frincipal Place of Business Mailing Address 9515 MILLEN DRIVE 9515 MILLEN DRIVE HARRISBURG NC 28075 HARRISBURG NC 28075



3. Date Incorporated or Qualified 3a. Date of Last Report

						06/15/1994	01/31/1	995	
2. Principal Pla		2a. Mailing Address				4. FEI Number		Applied For	
21 5295 ₪	YOWN CENTER ROAD	26 5295 TOWN C	26 5295 TOWN CENTER ROAD			65-0484313		Not Applicable	
	Suite, Apt. #, etc. Suite, Apt. #, etc. 400 27 400					5. Certificate of Status Desired		5 Additional Required	
Oity & State 3 BOCA I	State Orty & State CA RATON, FL 28 BOCA RATON, I			FL		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
' Zip	Country	Zip		Country		8. This corporation has liability for in			
33486	25 PALM BEACH	29 33486	30	PALI	M BEACH	Florida Statutes Yes	⊠ No		
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered Agent		
				81	Name				
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET, STE 105 TALLAHASSEE FL 32301					82 Street Address (P.O. Box Number is Not Acceptable)				
					83				
					- 4		FL T	ip Code	
or registere familiar wit SIGNATURF	of the provisions of Sections 507,0502 of agent, or both, in the State of Florid in, and accept the obligations of, Soctions, and accept the obligations of Soctions of Sections of Sections of Sections of Sections of Sec	a, Such change was authorized on 607.0505, Florida Statutes.	by the	e corpo	armed corporation's board	ion submits this statement for the purp of directors. I hereby accept the appoi	ose of changing its intrinent as registered	registered office d agent. I am	
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13		a agriculure responded w	ADDITIONS/CHANGES TO OFFIC		ORS IN 12	
THE	PCDS	DELETE		1 TITLE			☐ Change		
NAME	RONDEAU, PATRICK E	_		NAME					
STREET ADDRESS	5295 TOWN CENTER ROAD				ADDRESS				
C TY-SI-7P	BOCA RATON FL			CITY-S	l l				
E II F	TD	DELETE	_	1 TITLE	1-211		Change	☐ Addition	
VAM:	MURRAY, ALAN L.			NAME					
STREET ADDRESS	5295 TOWN CENTER ROAD				ADDRESS				
S-IN SI-Z:P	BOCA RATON FL			CITY-S					
I ILF	VD	DELETE		1 TITLE	7-211		Change	[] Addition	
NAME	KOSCHER, DANIEL C			NAME					
SUBELF ADDRESS	5295 TOWN CENTER ROAD				ADDRESS				
1 IY 51-2P	BOCA RATON FL			CITY-S					
FILE	5501,141,511,12	DELETE		1 TITLE	,		☐ Change	Addition	
NAME			4.2	NAME			. –		
STREET ADDRESS			4.3	STREET	ADDRESS				
CP 1 - S 1 - 719				CITY - S	ı				
tere		DELETE		1 TITLE			Change	Addition	
NAME				NAME				_	
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP				CITY-S					
11°LE		DELETE		1 TITLE			☐ Change	Addition	
NAM _C		1	1	NAME					
STREET ACCORESS					ADDRESS				
CITY ST-ZIP	_			4 CHTY - S					
14. I do beretr	y certify that the information supplied w	ith this filing . voluntarily furnis	hed an	nd does	s not qualify for	the exemption stated in Section 119.0	17(3)(k). Florida Stati	ites. I further	
certify that eath; that I appears in	the information indicated in this and Lam an officer or director of the corpor Block 12 or Glock 13 it changed, or o	al report of supplemental annual ration or the receiver or trustee on an altachment with an address	al repor empov ss.	rt is tru vered t	e and accurate o execute this	the exemption stated in Section 119.0 e and that my signature shall have the s report as required by Chapter 607, Fio	ame legal effect as rida Statutes; and th	if made under nat my name	

eath; that I am an office or dire appears in Block 12 or Glock PATRICK E. RONDEAU SIGNATURE:

1/19/96

407-361-2705

Daytime Phone #