2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F99000005414

1. Entity Name
PATCO MANAGEMENT, INC.

Principal Place of Business	Mailing Address
1310 S HARBOR CITY BLVD MELBOURNE, FL 32901	1310 S HARBOR CITY BLVD MELBOURNE, FL 32901

DO NOT WRITE IN THIS SPACE

06302004   No Chg-P   CR2E034 (10/03)

4. FEI Number 88-0433839	Applied For
	Not Applicable

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

6. Name and Address of Current Registered Agent

PATTERSON, LAWRENCE R
3010 SOUTH THIRD STREET
JACKSONVILLE, FL 32250

Patel, Dinu
1310 S. Harbor City Blvd
Melbourne Fc 32901

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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 _____   DATE 7/06/04

Signature, typed or printed name of registered agent and title if applicable.   (NOTES: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PCD
NAME	PATEL, DINU
STREET ADDRESS	1310 SOUTH HARBOR CITY BLVD.
CITY-ST-ZIP	MELBOURNE, FL 32901

TITLE	ST
NAME	PATEL, DINU
STREET ADDRESS	1310 SOUTH HARBOR CITY BLVD.
CITY-ST-ZIP	STARKE, FL 32091

TITLE	*Patel, Dinu, President*
NAME	
STREET ADDRESS	*1310 South Harbor City Blvd*
CITY-ST-ZIP	*Melbourne, FL 32901*

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____   Dinu Patel   7/06/04   321 779 9994

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #