2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H69021

Entity Name: PAT MASTERS, INC.

FILED Jul 11, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

935 FIFTH AVENUE NORTH 1010 5TH AVE SOUTH NAPLES, FL 34102

SUITE 302

NAPLES, FL 34102

Current Mailing Address: New Mailing Address:

935 FIFTH AVENUE NORTH 1010 5TH AVE SOUTH NAPLES, FL 34102

NAPLES, FL 34102 US

FEI Number: 59-2570340 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MASTERS, KERRY P MASTERS, KERRY P 935 FIFTH AVENUE NORTH 4821 KESWICK WAY NAPLES, FL 34102 US NAPLES, FL 34105

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: 07/11/2005

> Electronic Signature of Registered Agent Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete MASTERS, KERRY PATRI, CK Name: 935 FIFTH AVENUE NORTH Address: City-St-Zip: NAPLES, FL 34102 US

Title: () Delete Name: WISE, MURRAY

935 FIFTH AVENUE NORTH Address: City-St-Zip: NAPLES, FL 34102 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: MASTERS, KERRY PATRI, CK Name: Address: 4821 KESWICK WAY City-St-Zip: NAPLES, FL 34105 US

Title: (X) Change () Addition

Name: WISE, MURRAY Address: 4309 CRAYTON ROAD NAPLES, FL 34103 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: KERRY P. MASTERS **DPVT** 07/11/2005