

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

1995
 APRIL 15, 1995



DEPARTMENT OF STATE
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

DOCUMENT # **K66022** (0)

95 MAY -1 PM 12:46

PAT PATTON, INC.

NAME AND ADDRESS OF CURRENT REGISTERED AGENT
 % GEORGE T. ELDRIDGE
 P O BOX 254
 MANGO FL 33550

NAME AND ADDRESS OF NEW REGISTERED AGENT
 % GEORGE T. ELDRIDGE
 P O BOX 254
 MANGO FL 33550

DATE OF WHICH THIS SPACE

2. Date of Report (Required)	2a. Making Agent	3. Date of Report (Required)	3a. Date of Last Report
21	26	02/15/1989	04/27/1994
22	27	4. FIC Number	Applied For
23	28	59-2939662	Not Applicable
24	29	5. Certificate of Status (Required)	\$8.75 Additional Fee Required
25	30	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
		7. This corporation has adopted the multiple tax system of Florida (Florida Statutes 218.01-218.04)	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ELDRIDGE, GEORGE T. 11509 E DR MLK JR BLVD P O BOX 1187 MANGO FL 33550	81. Name: George T. Eldridge 82. Street Address (or Box Number or Post Office Box): 11509 E. DR. M.L. KING, JR. BLVD 83. P.O. BOX 1187 84. City: MANGO, FL. FL 85. Zip Code: 33550/1187

11. I hereby certify that the information contained in this filing is substantially true and correct and that I am duly qualified to act as a registered agent for the purpose of changing the registered office of this corporation in the State of Florida. If this change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am not a partner, officer, director, or shareholder of the corporation being registered.

12. OFFICERS, DIRECTORS, AND SHAREHOLDERS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1995																																												
<table border="1"> <tr> <td>NAME</td> <td>DP PATTON, LUTHER PAT</td> <td>2813 OLAVET CT.</td> <td>VALRICO FL</td> </tr> <tr> <td>NAME</td> <td>S ELDRIDGE, GEORGE T.</td> <td>5587 58TH ST NORTH</td> <td>ST. PETERSBURG FL</td> </tr> <tr> <td>NAME</td> <td>D PATTON, LUTHER PAT</td> <td>2813 OLAVET CT</td> <td>VALRICO FL</td> </tr> </table>	NAME	DP PATTON, LUTHER PAT	2813 OLAVET CT.	VALRICO FL	NAME	S ELDRIDGE, GEORGE T.	5587 58TH ST NORTH	ST. PETERSBURG FL	NAME	D PATTON, LUTHER PAT	2813 OLAVET CT	VALRICO FL	<table border="1"> <tr> <td>NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> </tr> </table>	NAME				NAME				NAME				NAME				NAME				NAME				NAME				NAME			
NAME	DP PATTON, LUTHER PAT	2813 OLAVET CT.	VALRICO FL																																										
NAME	S ELDRIDGE, GEORGE T.	5587 58TH ST NORTH	ST. PETERSBURG FL																																										
NAME	D PATTON, LUTHER PAT	2813 OLAVET CT	VALRICO FL																																										
NAME																																													
NAME																																													
NAME																																													
NAME																																													
NAME																																													
NAME																																													
NAME																																													
NAME																																													

14. I hereby certify that the information contained in this filing is substantially true and correct and that I am duly qualified to act as a registered agent for the purpose of changing the registered office of this corporation in the State of Florida. If this change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am not a partner, officer, director, or shareholder of the corporation being registered.

SIGNATURE: *George T. Eldridge*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 George T. Eldridge
 SECRETARY
 5-14-95