

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L12529

Entity Name: PATS LIQUORS, INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

4870 HIGHWAY AVE.
JACKSONVILLE, FL 322543734

New Principal Place of Business:

Current Mailing Address:

4870 HIGHWAY AVE.
JACKSONVILLE, FL 322543734

New Mailing Address:

FEI Number: 59-2971753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLBRITTON, LAVON
RT 16 BOX 624
LAKE CITY, FL 32055 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SMITH, THOMAS L., SR.,
Address: 4538 PLYMOUTH ST
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: SMITH, NANCY S.,
Address: 4538 PLYMOUTH ST
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: ALLBRITTON, LAVON
Address: RT 16 BOX 624
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: LAVON ALLBRITTON

D

04/28/2005

Electronic Signature of Signing Officer or Director

Date