

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000011391

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** PATI MINISTRIES, INC.

**Current Principal Place of Business:**

1840 NORTH GOLDENROD RD.  
ORLANDO, FL 32807 US

**New Principal Place of Business:**

**Current Mailing Address:**

1840 NORTH GOLDENROD RD.  
ORLANDO, FL 32807 US

**New Mailing Address:**

**FEI Number:** 20-3760600

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PEREZ-APONTE, JOAQUIN  
10712 CYPRESS TRAIL DR.  
ORLANDO, FL 32825 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

**OFFICERS AND DIRECTORS:**

**Title:** EX.D  
**Name:** PEREZ-APONTE, JOAQUIN  
**Address:** 10712 CYPRESS TRAIL DR.  
**City-St-Zip:** ORLANDO, FL 32825 US

**Title:** SEC  
**Name:** TIRADO, ELSIE  
**Address:** 5719 DOGWOOD ST  
**City-St-Zip:** ORLANDO, FL 32807 US

**Title:** TRE  
**Name:** ROMAN, ROSA  
**Address:** 13213 BRIAR FOREST CT.  
**City-St-Zip:** ORLANDO, FL 32828

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** ROSA ROMAN

TRE

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date