

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006645

FILED
Apr 14, 2009
Secretary of State

Entity Name: OPERATION PATRIOT, INC.

Current Principal Place of Business:

5833 JENNY DR.
TAMPA, FL 33617

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2443
BRANDON, FL 33509

New Mailing Address:

FEI Number: 26-0496016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHMOND, SHARON
5833 JENNY DR.
TAMPA, FL 33617 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: P () Delete
Name: ESCOBIO, KEN
Address: 508 33 ST. SE
City-St-Zip: RUSKIN, FL 33570

Title: V () Delete
Name: HOWARD, ROBERT
Address: 10521 OPUS DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: ST () Delete
Name: RICHMOND, SHARON
Address: P.O. BOX 2443
City-St-Zip: BRANDON, FL 33509

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 exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARON RICHMOND

ST

04/14/2009

Electronic Signature of Signing Officer or Director

Date