2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 27, 2006 8:00 am Secretary of State **DOCUMENT # P00000033888** 03-27-2006 90250 033 ***150.00 PATTERSON FREIGHT COMPANY Mailing Address Principal Place of Business 3108 CENTRAL DRIVE 3108 CENTRAL DRIVE PLANT CITY, FL 33567 PLANT CITY, FL 33567 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 03222006 Chg-P CR2E034 (11/05) Applied For City & State 4. FEI Number City & State 59-3635194 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SPERRY, BRUCE J Street Address (P.O. Box Number is Not Acceptable) 1003 SOUTH ALEXANDER STREET SUITE 1 PLANT CITY, FL 33566 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWI! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. Change ۷D ☐ Addition PD TITLE TILE Celete NAME PATTERSON, STEPHEN NAME 3108 CENTRAL DR STREET ADDRESS STREET ADDRESS 4634 DREW COURT CRY-ST-ZIP PLANT CITY FL 33566 LAKELAND, FL 33810 CITY-ST-ZIP Change ☐ Addition STD ☐ Delete TITLE TITLE NAME BARBOUR, JEAN NAME STREET ADDRESS STREET ADDRESS 4956 COLONNADE CLUB BLVD CITY-ST-7IP CITY-ST-ZIP LAKELAND, FL 33811 Change ☐ Addition 50 D ☐ Delete TITLE TITLE NAME JOHNSON, FRED NAME 7815 ROLLING GROVE DRIVE WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP LAKELAND, FL 33810 Addition ☐ Change ☐ Delete TITLE TITLE HOWARD STEPHEN 3108 CENTRAL DR NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLANT CITY FL 33566 CTTY-ST-ZIP Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition Delete ΠΠF TILE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

lan Barbara SIGNATURE.

JEAU BARBOUR

FILED