

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000004011

Entity Name: PAT WILLSON HOMES, INC.

**FILED**  
**Jan 28, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

1312 ANTRIM CIRCLE  
ORMOND BEACH, FL 32174

## **New Principal Place of Business:**

## **Current Mailing Address:**

1312 ANTRIM CIRCLE  
ORMOND BEACH, FL 32174

## **New Mailing Address:**

FEI Number: 59-3727254

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLSON, PATRICIA N  
1312 ANTRIM CIRCLE  
ORMOND BEACH, FL 32174 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: P  
Name: WILLSON, PATRICIA  
Address: 1312 ANTRIM CIRCLE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: V  
Name: WILLSON, MANNING E  
Address: 1312 ANTRIM CIRCLE  
City-St-Zip: ORMOND BEACH, FL 32174

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

SIGNATURE: PATRICIA WILLSON

P

01/28/2010

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

\_\_\_\_\_  
Date