

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000001169

Entity Name: PATE ENTERPRISES, INC.

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2140 N.W. 18TH PLACE  
CAPE CORAL, FL 33993

**New Principal Place of Business:**

3923 CHERRY LANE  
ST. JAMES CITY, FL 33956

**Current Mailing Address:**

2140 N.W. 18TH PLACE  
CAPE CORAL, FL 33993

**New Mailing Address:**

3923 CHERRY LANE  
ST. JAMES CITY, FL 33956

FEI Number: 02-0539059

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PATE, LARRE T  
2140 N.W. 18TH PLACE  
CAPE CORAL, FL 33993 US

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

PATE, LARRE T  
3923 CHERRY LANE  
ST. JAMES CITY, FL 33956 US

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

04/12/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PATE, LARRE T  
Address: 3923 CHERRY LANE  
City-St-Zip: ST. JAMES CITY, FL 33956

Title: V  
Name: PATE, GINA M  
Address: 3923 CHERRY LANE  
City-St-Zip: ST. JAMES CITY, FL 33956

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: GINA M. PATE

V

04/12/2011

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

\_\_\_\_\_  
Date