

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000093611

1. Entity Name
PATTON TIRE, INC.



Principal Place of Business
145 N CENTRAL AVE, 1370 N Scenic Hwy Mailing Address
LAKE WALES, FL 33853 PO BOX 467
LAKE WALES, FL 33859-0467

**FILED
Aug 22, 2006 8:00 am
Secretary of State**

08-22-2006 90031 022 ***150.00



08072006 No Chg-P CR2E034 (11/05)

4. FEI Number 11-3649940	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PATTON, DARREN
1931 CAPPS ROAD
LAKE WALES, FL 33898
420 Talamone Drive
Winter Haven, FL
33884

**DO NOT WRITE
IN THIS SPACE**

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

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D
NAME PATTON, DARREN
STREET ADDRESS 1931 CAPP'S ROAD
CITY-ST-ZIP LAKE WALES, FL 33898

TITLE
NAME
STREET ADDRESS
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.

SIGNATURE:

Darren Patton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

863-678-9800

Daytime Phone #