

P020000120725

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

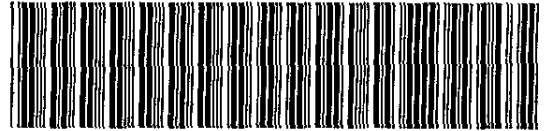
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O/D Resig.

7/5
9/13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PATRON, INC.

(Name of corporation)

DOCUMENT NUMBER: P02000120725

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RONALD L OBERMEYER

(Name of contact person)

PATRON, INC.

(Firm/Company)

PO BOX 606

(Address)

LOUGHMAN, FL 33858-0606

(City/state and zip code)

For further information concerning this matter, please call:

RONALD L OBERMEYER

(Name of contact person)

at (407)

509-1932

(Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

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04 SEP -3 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, PATRICIA K OBERMEYER, hereby resign as Pres/Treas/Director
(Title)

of PATRON, INC.
(Name of Corporation)

P02000120725, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director) 7/1/04

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314