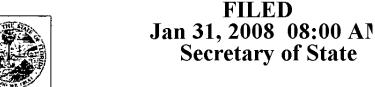
2008 FOR PROFIT CORPORATION

ANNUAL REPORT (AR) DOCUMENT # P03000025393 1. Entity Name



PATE REAL ESTATE, INC.					Secretary of Stat			
Principal Place of Business Mailing Address					_			
2055 HWY A-1-A #102 2055 HWY A								
2. Principal Place of Business - No P.O. Box #		3. Mailing Address				1 61166 11116 16166 1	I+III II I	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE	CR2E034	4 (10/07)		
City & State		City & State		4. FEI Number 86-1052110 Applied For Not Applicable				
Zıp	Country Z:p C		Country	у	5. Certificate of Status Desired S8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
PATE, SHIRLEY R				Name				
2055 HWY A-1-A #102 INDIAN HARBOUR BEACH FL 32937				Street Address (P.O. Box Number is Not Acceptable)				
			-	City		FL	Zip Cod	e
	named entity submits this statement fo	or the purpose of changing its	registered	foffice or register	red agent, or noth, in the State of		familiar with.	and accept
•	tions of registered agent.							
SIGNATURE	Signature, typed or printed name of registiciad agent	and the Tampicable. (NOT	E Registraed A	Agent a gisature required	whon reinstaur g)	DATE		
After A	ILE NOW!!! FEE IS \$150.00 May 1, 2008 Fee Will Be \$550.00 k Payable to Florida Department o	14.753			9. Election Car Trust Fund (mpaign Financ Centribution.		00 May Be ed to Fees
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO C	OFFICERS AND	DIRECTOR:	S IN 11
TITLE	SD	☐ Deiete ☐ □					☐ Change	Addition
NAME			NAME					
STREET ADDRESS CITY - ST - ZIP	2055 HIGHWAY A1A #102 INDIAN HARBOUR BEACH FL 329	937	STREET CITY-S	ADDRESS T- ZIP	U0000/ 02/05/08	0805262 -80102-0)06 150.	00
TITLE	VD	☐ Dalete	TITLE				☐ Change	Addition
NAME	PATE, WAYNE		MAIAE					
STREET ADDRESS CITY-ST-7IP	1002 INDIAN RIVER AVENUE TITUSVILLE FL 32780		STREET CITY S	ADDRESS T-ZIP				
ПТСЕ	D	☐ De⊦ete	TITLE		***************************************		☐ Change	Addition
NAME .	PATE, SHIRLEY R		NAME					
STREET ADDRESS	1002 INDIAN RIVER AVENUE		STREET	ADDRESS				-
CITY-ST-ZIP	TITUSVILLE FL 32780		City-3	T-ZIP				
TITLE		☐ Delete	TITLE				Change	☐ Addition
TIAME	(NAME					
STREET ADDRESS CITY-ST-ZIP			STREET CITY-S	ADDRESS T. 700				
·			-	1*4P	*			[m] A
TITLE NAME		☐ Derete	TITLE				Change	Addition
STREET ADURESS			NAME	ADDRESS				
GITY-ST-ZIP			CITY-S	I				
TITLE		☐ Deiele	TMLE				☐ Change	Acdition
	T. Company of the Com			i i				· - · · · · ·

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, Florida Statutes. Hurther 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 Criapter 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP