


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 03, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000063046
1. Entity Name
PATRIOT POWER & TELECOM SYSTEMS, INC.



Principal Place of Business: **15044 REGINALD LANE HUDSON, FL 34667**
Mailing Address: **15044 REGINALD LANE HUDSON, FL 34667**

DO NOT WRITE IN THIS SPACE



01072005 No Chg-P CR2E034 (10/03)

4. FEI Number: **86-1067273** Applied For: Not Applicable:
5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**TAYLOR, LAURA L
12721 SUGAR CREEK BLVD
HUDSON, FL 34669**

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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: *Laura L Taylor* (NOTE: Registered Agent signature required when reinstating) DATE: *03/01/05*

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BERTINE, CHARLES D
STREET ADDRESS	15044 REGINALD LANE
CITY-ST-ZIP	HUDSON, FL 34667
TITLE	VPT
NAME	MCCANNA III, RICHARD E
STREET ADDRESS	15044 REGINALD LANE
CITY-ST-ZIP	HUDSON, FL 34667
TITLE	S
NAME	TAYLOR, LAURA L
STREET ADDRESS	15044 REGINALD LANE
CITY-ST-ZIP	HUDSON, FL 34667
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/03/05-80911-028 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Laura L Taylor* (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) DATE: *03/01/05* 727 862-5349 (Daytime Phone #)