# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 03, 2011**
**Secretary of State**

DOCUMENT# P06000081584

**Entity Name:** PATRIS OF ST. AUGUSTINE, INC.

**Current Principal Place of Business:**

1 UNIVERSITY BLVD
ST AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

1 UNIVERSITY BLVD
ST AUGUSTINE, FL 32086

**New Mailing Address:**

**FEI Number: 20-5052554** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

UPCHURCH, FRANK D III
780 N PONCE DE LEON BLVD
ST AUGUSTINE, FL 32084 US

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

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 Date

**OFFICERS AND DIRECTORS:**

Title: PD
Name: PARIS, STANLEY V
Address: 1 UNIVERSITY BLVD
City-St-Zip: ST AUGUSTINE, FL 32086

Title: SD
Name: PATLA, CATHERINE E
Address: 1 UNIVERSITY BLVD
City-St-Zip: ST AUGUSTINE, FL 32086

Title: VT
Name: ANDERSON, MATTHEW S
Address: 1 UNIVERSITY BLVD
City-St-Zip: ST AUGUSTINE, FL 32086

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: MATTHEW S. ANDERSON VT 02/03/2011

Electronic Signature of Signing Officer or Director Date