

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P18563 (7)

1. Corporation Name

PATTEN GEORGIA CORPORATION



Principal Place of Business

5295 TOWN CENTER RD
STE 400
BOCA RATON FL 33486
US

Mailing Address

5295 TOWN CENTER RD
STE 400
BOCA RATON FL 33486
US

3. Date Incorporated or Qualified

03/24/1988

3a. Date of Last Report

01/26/1995

2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

State, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

03-0313454

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of principal officer, director, or registered agent, or both, as applicable.

(NOTE: Registered Agent signature required when re-registering.)

DATE

12. OFFICERS AND DIRECTORS

TITLE

P

RONDEAU, PATRICK E
5295 TOWN CTR. RD.
BOCA RATON FL

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

SD

RONDEAU, PATRICK E.
5295 TOWN CTR. RD.
BOCA RATON FL

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

TD

MURRAY, ALAN L.
5295 TOWN CTR. RD.
BOCA RATON FL

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

V

GORMAN, JOANNE
5295 TOWN CENTER RD
BOCA RATON FL

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

V

KOSCHER, DANIEL C.
5295 TOWN CTR. RD.
BOCA RATON FL

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

VD

DANIEL C. KOSCHER
5295 TOWN CENTER ROAD
BOCA RATON, FL 33486

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☒ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PATRICK E. RONDEAU

1/19/96

407-361-2705

DATE

DATE PHONE #

CR2E034 (12/95)