

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P92000014085 (4)

1. Corporation Name

PATTERSON & ASSOCIATES CPA'S, P.A.



Principal Place of Business

Mailing Address

100 EXECUTIVE WAY  
SUITE 204  
PONTE VEDRA BEACH FL 32082

100 EXECUTIVE WAY  
SUITE 204  
PONTE VEDRA BEACH FL 32082

2. Principal Place of Business

2a. Mailing Address

21 85 S. ROSCOE BLVD.

26 PO BOX 2229

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 PONTE VEDRA BEACH, FL

28 PONTE VEDRA BEACH, FL

Zip

Country

Zip

Country

24 32082

25 US

29 32004-2229

30 US

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified  
12/24/1992

3a. Date of Last Report  
02/06/1995

4. FEI Number  
59-3156519

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

10. Name and Address of New Registered Agent

PATTERSON, CECIL JR  
100 EXECUTIVE WAY  
SUITE 204  
PONTE VEDRA BEACH FL 32082

81 Name

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

85 S. ROSCOE BLVD

83

84 City

PONTE VEDRA BEACH FL

85 Zip Code

32082

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

Cecil Patterson Jr.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-19-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME PATTERSON, CECIL JR  
STREET ADDRESS 85 S. ROSCOE BLVD.  
CITY-ST-ZIP PONTE VEDRA BEACH FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ 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:

Cecil Patterson Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-19-96

(904) 285-4489

DATE

Telephone Number

CR2E034 (12/95)