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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P9200014085 (4) 1. Corporation Name				
PATTERSON & ASSOCIATES CPA'S, P.A.				
Principal Place of Business	Mailing Address		· - {	######################################
100 EXECUTIVE WAY	100 EXECUTIVE WAY			
SUITE 204 PONTE VEDRA BEACH FL 32082	Suite 204 Ponte Vedra Beaci	H FL 32082		
	TOTAL VEDILA BERGI	7771 02002	3. Date Incorporated or Qualified	*
2. Principal Place of Business	2a. Mailing Address		12/24/1992 4. FEI Number	02/06/1995 Applied For
21 85 S. ROSCOE BLUD.	26 PO BOX	2229	59-3156519	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	City & State		6. Election Campaign Financing	Fee Required
23 PONTE VEDRA BEACH, FL		2A BEHOW, PL	Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zφ	Country	8. This corporation has liability fo	
24 32082 25 US 9. Name and Address of Curren	29 33004-3119 nt Registered Agent	30 45	Florida Statutes Yo 10. Name and Address of New	s No Registered Agent
		81 Name		Hegiototo Agom
PATTERSON, CECIL JR		82 Street Addre	ress (P.O. Box Number is Not_Accepts	(D <u>F</u>)
100 EXECUTIVE WAY		85 S	s, roscoe blu	
Suite 204 Ponte Vedra Beach Fl 32082				
LOUIS ASDUM DEVOLLE OFFOR		84 City	TE VEDRA BEAC	A FI 85 Zip Code
		1 1 601/1	us amina polic	
Pursuant to the provisions of Sections 607.0502 or registered agent, or both, in the State of Flori	2 and 607.1508, Florida Statutes	s, the above-named corpora	ration submits this statement for the p	urpose of changing its registered office
Pursuant to the provisions of Sections 607.0502 or registered agent, or both, in the State of Flori familiar with, and accept the obligations of, Sections	ida. Such change was authorized	the above-named corpora	ration submits this statement for the p	irpose of changing its registered office pointment as registered agent. I am
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE	ida. Such change was authorized tion 607.0505, Florida Statutes.	s, the above-named corpora d by the corporation's boar	ration submits this statement for the p rd of directors. I hereby accept the ap	urpose of changing its registered office pointment as registered agent. I am
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE Signature, typed or printed name of registered agent	ida: Such change was authorized tion 607,0505, Florida Statutes. Land this flame was involved in the control of the control o	the above-named corpora	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	urpose of changing its registered office pointment as registered agent. I am - 19-96 DATE FICERS AND DIRECTORS IN 12
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE Signature, typed or printed name of registered agent 12. OFFICERS AN TITLE PD	ida. Such change was authorized tion 607,0505, Florida Statutes.	s, the above named corporated by the corporation's boards from the corporation's boards from the from the corporation of the co	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	pointment as registered agent. I am - 19-95
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE Signature, typed or printed rame of registered agent PD TITLE PD NAME PATTERSON, CECIL JR	ida: Such change was authorized tion 607,0505, Florida Statutes. Land this flame was involved in the control of the control o	s, the above named corporated by the corporation's boars Friggstored Agent's greater by incl. 13. 1.1 Title 1.2 NAME	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	pointment as registered agent. I am - 19-96 DATE FICERS AND DIRECTORS IN 12
tamiliar with, and accept the obligations of Social Signature, sped or privad rank of registered agent. Signature, sped or privad rank of registered agent. OFFICERS AN TITLE PD NAME PATTERSON, CECIL JR STREET ADDRESS 85 S. ROSCOE BLVD.	ida: Such change was authorized tion 607,0505, Florida Statutes. Land this flame was involved in the control of the control o	s, the above named corporate by the corporation's boar 13. 1.11///LE 1.2 NAME 3 STREET ADDRESS	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	pointment as registered agent. I am - 19-96 DATE FICERS AND DIRECTORS IN 12
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE Signature, typed or primed rame of registered agent PD TITLE PD NAME PATTERSON, CECIL JR	ida: Such change was authorized tion 607,0505, Florida Statutes. Land this flame was involved in the control of the control o	s, the above named corporated by the corporation's boars Friggstored Agent's greater by incl. 13. 1.1 Title 1.2 NAME	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	pointment as registered agent. I am - 19-96 DATE FICERS AND DIRECTORS IN 12
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE Signature, typed or private name of registered agent OFFICERS AN OFFICERS AN PATTERSON, CECIL JR STREET ADDRESS 85 S. ROSCOE BLVD. CIEY-ST-ZIP PONTE VEDRA BEACH FL	Ida: Such Change was authorized tion 607,0505, Florida Statutes. Land Mic if annual in incite incit	s, the above named corporate by the corporation's boar Beginned Agent significant into 13. 1.11/ILE 12.NAME - 3.STREET ADDRESS 14.CHY-ST-ZIP	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	Pointment as registered agent. I am - 19-96 DATE FICERS AND DIRECTORS IN 12 Change Addition
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE Signature, typed or printed rame of may stered agent to DEFICERS AN TILLE PD PATTERSON, CECIL JR STREET ADDRESS 85 S. ROSCOE BLVD. PONTE VEDRA BEACH FL TILLE NAME STREET ADDRESS STREET ADDRESS	Ida: Such Change was authorized tion 607,0505, Florida Statutes. Land Mic if annual in incite incit	s, the above named corporation's board by the corporation's board. 13. 1.11/ILE 12.NAME 13.STREELADDRESS 14.CHY-SL-ZIP 2.11/ILE	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	Pointment as registered agent. I am - 19-96 DATE FICERS AND DIRECTORS IN 12 Change Addition
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE SIGNATURE Signature, typed or printed name of may stered agent to DEFICERS AN PATTERSON, CECIL JR STREET ADDRESS OITY-ST-ZIP PONTE VEDRA BEACH FL TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OFFICERS AN PONTE VEDRA BEACH FL TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ida. Such change was authorized tion 607,0505, Florida Statutes. Land tic If any house (NOTE) DIRECTORS DELETE	s, the above-named corporate by the corporation's boar 13. 1.1 Title 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	Pointment as registered agent. I am
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE Signature, typed or printed rame of registered eigent printed	Ida: Such Change was authorized tion 607,0505, Florida Statutes. Land Mic if annual in incite incit	s, the above-named corporate by the corporation's boar 13. 1.1 Title 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	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	Pointment as registered agent. I am - 19-96 DATE FICERS AND DIRECTORS IN 12 Change Addition
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE SIGNATURE Signature, typed or printed name of may stered agent to DEFICERS AN PATTERSON, CECIL JR STREET ADDRESS OITY-ST-ZIP PONTE VEDRA BEACH FL TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OFFICERS AN PONTE VEDRA BEACH FL TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ida. Such change was authorized tion 607,0505, Florida Statutes. Land tic If any house (NOTE) DIRECTORS DELETE	s, the above-named corporate by the corporation's board 13. 1.1 THE 12 NAME 13 STREET ADDRESS 14 CHY-SI-ZIP 2 THILE 22 NAME 23 STREET ADDRESS 24 CHY-SI-ZIP 3 THILE 32 NAME 32 NAME	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	Pointment as registered agent. I am
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE Signature, typed or printed rame of registered agent properties. 12. OFFICERS AN PATTERSON, CECIL JR STREET ADDRESS 85 S. ROSCOE BLVD. PONTE VEDRA BEACH FL III.E NAME STREET ADDRESS CITY-ST-ZIP III.E NAME	Ida. Such change was authorized tion 607,0505, Florida Statutes. Land tic If any house (NOTE) DIRECTORS DELETE	s, the above-named corporate by the corporation's boar 13. 1.1 Title 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	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	Pointment as registered agent. I am
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered agent properties. Signature, typed or printed rame of registered	Ida. Such change was authorized tion 607,0505, Florida Statutes. Land tic If any house (NOTE) DIRECTORS DELETE	s, the above named corporate by the corporation's board 13. 1.1 Title 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3 TITLE 32 NAME 33 STREET ADDRESS 53 STREET ADDRESS	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	Pointment as registered agent. I am
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE SIGNATURE Signature, typed or printed rame of registered agent properties. TITLE PD PATTERSON, CECIL JR STREET ADDRESS 85 S. ROSCOE BLVD. CITY-ST-ZIP PONTE VEDRA BEACH FL TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE AAM: STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME	Ida. Such change was authorized the form 607,0505, Florida Statutes. Land the Hammyle NOTE DELETE DELETE	s, the above-named corporate by the corporation's board 13. 1.1 Title 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3 1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	DATE FICE RIS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Section 12. SIGNATURE Signature, typed or printed rame of registered agent printed from the state of the obligations of Section 12. OFFICERS AN PATTERSON, CECIL JR STREET ADDRESS 85 S. ROSCOE BLVD. DITLE NAME SIREET ADDRESS CITY-S1-ZIP TITLE NAME SIREET ADDRESS	Ida. Such change was authorized the form 607,0505, Florida Statutes. Land the Hammyle NOTE DELETE DELETE	s, the above-named corporate by the corporation's board by the corporation's board 13. 1.1 Title 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3 1 THILE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 4 1 TITLE 42 NAME 43 STREET ADDRESS	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	DATE FICE RIS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Sect SIGNATURE SIGNATURE Synature, typed or printed rame of registered agent properties. PD NAME PATTERSON, CECIL JR STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP	COA. SUCH CHARGE WAS AUTHORIZED TOO TOO TOO TOO TOO TOO TOO TOO TOO TO	s, the above-named corporate by the corporation's board by the corporation's board 13. 1.1 Title 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3 1 THILE 32 NAME 33 STREET ADDRESS 34 C-TY-ST-ZIP 4 1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	DATE FICE FIS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Section 12. SIGNATURE Syndrum, typed or primod rame of registered agent 12. OFFICERS AN 11ILE PD PATTERSON, CECIL JR STREET ADDRESS 85 S. ROSCOE BLVD. CITY-ST-ZIP PONTE VEDRA BEACH FL 11ILE NAME STREET ADDRESS CITY-ST-ZIP 1IILE NAME STREET ADDRESS CITY-STREET ADDRES	Ida. Such change was authorized the form 607,0505, Florida Statutes. Land the Hammyle NOTE DELETE DELETE	s, the above-named corpora d by the corporation's boar 13. 1.1 Title 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3 1 THILE 32 NAME 33 STREET ADDRESS 34 C-TY-ST-ZIP 4 1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 5 1 TITLE	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	DATE FICE RIS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Section 12. SIGNATURE Synature, typed or primod rame of registered agent primod rame of re	COA. SUCH CHARGE WAS AUTHORIZED TOO TOO TOO TOO TOO TOO TOO TOO TOO TO	s, the above-named corporate by the corporation's board 13. 1.1 Title 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 THILE 32 NAME 33 STREET ADDRESS 34 C-TY-ST-ZIP 4 1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 5 1 TITLE 52 NAME	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	DATE FICE FIS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Section 1. SIGNATURE Syndrum, typed or printed rank of registered agent 1. 12. OFFICERS AN 1. III.E PD PATTERSON, CECIL JR STREET ADDRESS 85 S. ROSCOE BLVD. PONTE VEDRA BEACH FL 1. III.E NAME STREET ADDRESS CITY-S1-ZIP 1.	COA. SUCH CHARGE WAS AUTHORIZED TOO TOO TOO TOO TOO TOO TOO TOO TOO TO	s, the above-named corporate by the corporation's board 13. 1.1 Title 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 THLE 32 NAME 33 STREET ADDRESS 34 C-TY-ST-ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 5 TITLE 52 NAME 53 STREET ADDRESS 53 STREET ADDRESS 54 CITY-ST-ZIP 5 TITLE 52 NAME 53 STREET ADDRESS	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	DATE FICE FIS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Section 12. SIGNATURE Synature, typed or primod rame of registered agent primod rame of re	COA. SUCH CHARGE WAS AUTHORIZED TOO TOO TOO TOO TOO TOO TOO TOO TOO TO	s, the above-named corporate by the corporation's board 13. 1.1 Title 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 THILE 32 NAME 33 STREET ADDRESS 34 C-TY-ST-ZIP 4 1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 5 1 TITLE 52 NAME	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	DATE FICE FIS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Section 12. SIGNATURE Synature, typed or primod rame of registered agent primod rame of re	COA. SUCH CHARGE WAS AUTHORIZED THOM TO STATUTE STATUTE IN OTE IN	s, the above-named corporate by the corporation's board 13. 1.1 Title 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 THILE 32 NAME 33 STREET ADDRESS 34 C-TY-ST-ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 5 1 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 5 1 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 5 1 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	Change Addition Change Addition Change Addition
or registered agent, or both, in the state of Flori familiar with, and accept the obligations of, Section 12. SIGNATURE Signature, typed or printed rank of registered agent 12. OFFICERS AN 11ILE PD PATTERSON, CECIL JR STREET ADDRESS 85 S. ROSCOE BLVD. PONTE VEDRA BEACH FL 11ILE NAME STREET ADDRESS CITY-ST-ZIP TITLE TI	COA. SUCH CHARGE WAS AUTHORIZED THOM TO STATUTE STATUTE IN OTE IN	s, the above-named corporate by the corporation's board 13. 1.1 Title 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 42 NAME 43 STREET ADDRESS 34 C-TY-ST-ZIP 4 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 5 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 5 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 5 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 6 TITLE	ration submits this statement for the p rd of directors. I hereby accept the ap these renstating	Change Addition Change Addition Change Addition

4. To nereby certify that the information supplied with this illing is voluntarily turnished and does not quality 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

1-19-96

904) 285-4489