

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 16 1997 8:00am
Secretary of State

DOCUMENT # P93000030668 (6)

1. Corporation Name

PATCHTAR CORPORATION

Principal Place of Business

3350 ULMERTON RD
#3
CLEARWATER FL 34622
US

Mailing Address

3350 ULMERTON RD.
SUITE 3
CLEARWATER FL 34622-3313
US



2. Principal Place of Business

21 14100 US HWY 19 N, #107

Suite, Apt. #, etc.

22 14100 US HWY 19 N, #107

City & State

23 CLEARWATER, FL

Zip

24 34624

Country

25 PINELLAS

2a. Mailing Address

26 14100 US HWY 19 N, #107

Suite, Apt. #, etc.

27 14100 US HWY 19 N, #107

City & State

28 CLEARWATER, FL

Zip

29 34624

Country

30 PINELLAS

3. Date Incorporated or Qualified

04/27/1993

3a. Date of Last Report

06/13/1996

4. FEI Number

59-2176669

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional

Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be

Trust Fund Contribution

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

LILLY, DORIS M
3350 ULMERTON RD.
SUITE 3
CLEARWATER FL 34622

10. Name and Address of New Registered Agent

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME LILLY, DORIS M
STREET ADDRESS 3350 ULMERTON RD, SUITE 3
CITY-ST-ZIP CLEARWATER FL

TITLE D ☐ DELETE

NAME LILLY, C J
STREET ADDRESS 3350 ULMERTON RD, STE 3
CITY-ST-ZIP CLEARWATER FL

TITLE D ☐ DELETE

NAME LILLY, PATRICIA J
STREET ADDRESS 2288 HERON CIRCLE
CITY-ST-ZIP CLEARWATER FL

TITLE D ☐ DELETE

NAME LILLY, CHRISTINE M
STREET ADDRESS 2288 HERON CIRCLE
CITY-ST-ZIP CLEARWATER FL

TITLE D ☐ DELETE

NAME LILLY, TARA M
STREET ADDRESS 2288 HERON CIRCLE
CITY-ST-ZIP CLEARWATER FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME LILLY, DORIS M
1.3 STREET ADDRESS 14100 US HIGHWAY 19 N, #107
1.4 CITY-ST-ZIP CLEARWATER, FL 34624

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME LILLY, C J
2.3 STREET ADDRESS 14100 US HIGHWAY 19 N, #107
2.4 CITY-ST-ZIP CLEARWATER, FL 34624

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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

Doris M Lilly

5-1-97

813-535-7404

CR2E034 (9/96)