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Apr 08 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000058347 (4)

1. Corporation Name

THE PATIO CORNER, INC.



Principal Place of Business

11120 CLEVELAND AVE
FT. MYERS FL 33907

Mailing Address

11120 CLEVELAND AVE
FT. MYERS FL 33907-2318

3. Date Incorporated or Qualified

08/16/1993

3a. Date of Last Report

02/09/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

WILLENBACHER, LOUISE A
11120 CLEVELAND AVE
FT. MYERS FL 33907

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 PS
NAME WILLENBACHER, LOUISE A.
STREET ADDRESS 15650 QUEENSFERRY DR.
CITY-ST-ZIP FT. MYERS FL

DELETE

TITLE VPT
NAME WILLENBACHER, LEO J.
STREET ADDRESS 15650 QUEENSFERRY DR.
CITY-ST-ZIP FT. MYERS FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 12091 WEDGE DRIVE
1.4 CITY-ST-ZIP FT. MYERS, FL 33913

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 12091 WEDGE DRIVE
2.4 CITY-ST-ZIP FT. MYERS, FL 33913

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS

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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LOUISE A. WILLENBACHER
4-3-97 941-939-7656

Daytime Phone

0398007

CR2E034 (9/96)