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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

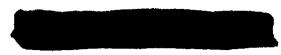
DOCUMENT #

P95000056563 (6)

PATTON ENTERPRISES, INC.

3,16,98

FILED May 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							
102 GRANT DR. P.O. BOX 1975							,
INTERLACHEN FL 32148		INTERLACHEN FL 321	INTERLACHEN FL 32148				
						DO NOT WRITE IN T	HIS SPACE
						 Date Incorporated or Qualified 07/21/1995 	
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number	Applied For
21		26	26			59-3327682	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27				S. Continuate of Glatus Desired	Fee Required
City & Stat	e	City & State	 			6. Election Campaign Financing	\$5.00 May Be
23 Zip		28				Trust Fund Contribution	Added to Fees
一	Country	Z(p		untry		8. This corporation owes or has paid the	
24	25 Name and Address of Curr	29	30	т		Personal Property Tax due June 30.	Yes X No
a Harris and Address of Culterit Registered Agent					Name	10. Name and Address of New Registe	red Agent
PATTON, SUZANNE C 102 GRANT DR.				81	Name		
					Street A	ddress (P.O. Box Number is Not Acceptable)	
1171	TERLACHEN FL 32148			83		-	
				03			
				84	City		85 Zip Code
	10			<u>Ļ., l.</u> ,			-L '
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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or printed name of region tests per and titled application (NOT). Registered Agent signature required when reinstating). DATE							
					i signature re		
12.	D	DELETE	13.	IT/ C		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
NAME	PATTON, SUZANNE C		1.2 N				Change Addition
STREET ADORESS	102 GRANT DR.		1.3 STREET ADD		DOULCE		
CITY-ST-ZIP	INTERLACHEN FL 32148			1.4 CITY-ST-ZIP			
TITLE	D	DELETE	211		ZIP		Change Addition
NAME	PATTON, ROBERT A		2.2 N		- 1		C oughligo C Manifoli
STREET ADDRESS	102 GRANT DR.		1	TAEET AL	DDDECC		
CITY-ST-ZIP	INTERLACHEN FL 32148			MY-SI-			
TITLE		DELETE	3.1 Ti		· ZIF		Change Addition
NAME			3.2 N				Change Modifoli
STREET ADDRESS				IREET AL	DDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		1		İ
TITLE		DELETE	4.1 TI				Change Addition
NAME			4.2 N				
STREET ADDRESS				TREET AC	ODRESS		
CITY-ST-ZIP				ITY-ST-	- 1		
TITLE		DELETE	5.1 11				☐ Change ☐ Addition
NAME			5.2 NA				- الم
STREET ADDRESS				TREET AD	DORESS		اردی
CITY-ST-ZIP			4	TY-ST-	- 1		<i>5.1</i> 31
TITLE		DELETE	6.1 70			grant gang gang gang gang gang gana gana g	Change
NAME			6.2 NA			6000025256 -0\$/15/9801080	395 ·
STREET ADDRESS				REET AC	DDRESS	-U5/15/38U1U8U	U43
CITY-ST-ZIP				TY-ST-	- 1	*** 150. 80	
4.4		Total 11 (1) 11 (1) 11 (1) 11 (1)	3.0				

14. I 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 supplienental 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 charged, or on an attachment with an address.