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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000081537 (8)

PATTERSON DONDERO, INC.

FILED
May 23 1997 8:00am
Secretary of State

Principal Plac	e of Business	Mailing Address									
SARS VICEN DE	ESTE	5426 VILLA DE EST	- 6426 VILLA DE ESTE								
WESLEY CHAPE			WESLEY CHAPEL FL 33543			u. L	San				
							Date Incorporated or Qualified 10/02/1996	3a. Da	ate of Last Re	eport	
	Place of Business BAYWOOD LA	2e. Mailing Address 16 2938				`	4. FEI Number 593415407		No	oplied For of Applicable	
Suite, Apl.	#, elc.	Suite, Apt. #, ∈					5. Certificate of Status Desired		\$8.75 / Fee Re		
City & Stat	e	City & State					6. Election Campaign Financing		\$5.00		
23		28	Zip Country				Trust Fund Contribution Added to Fees 8. This corporation has liability for Intangible tax under s. 199.032,				
24	25	······································	29 30				Florida Statutes				
[24]		Current Registered Agent	1901	Τ			10. Name and Address of New Re				
DATI	EDOAN DAT		/ # #IC	81	Name		1.3	***************************************			
	MUADE ENTE 299-	OUDWHAE 35	LANC		Chront	A of olso	ss (P.O. Box Number is Not Acceptab	la)			
	LEY CHAPEL FL 33543			82	Street A	4uare:	ss (P.O. Box Number is Not Acceptab	ne)			
1120	CCT OTHER LETTE SOUTH			83			*				
				84	City			FL	. '	Code	
11. Pursuant office or agent. La SIGNATURE	1 Doct	07.0502 and 607,1608, Florida © State of Florida, Such chang © obligations of Scotion 607.0 Page 1 and 186 Happlicable	7	7			ration submits this statement for the p n's board of directors. I hereby accep d when reinstaling)	ourpose of of the app	changing it in contract as	ts registered registered	
12.		RS AND DIRECTORS	13.		on any nation o		_ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12	
101LE	PTSD	DEL		ITLE		P	0		Change	Addition	
NAME	PATTERSON, PAT	. •		AME		PA	HIERSON PAT	ANE			
STREET ADDRESS	5425 VILLA DE ESTE		1.3 \$	TREET	ADDRESS		1938 BAYWOOD		7754	43	
CrtY+ST+ZIP	WESLEY CHAPEL FL 335	i 4 3	1.4 0	Q-YTK	ST - ZIP	W	eared chaler	, ~~	, 30 -	•	
TITLE		☐ DEL			···	7	5.0.		Change	Addition Addition	
NAME			221	IAME		Lo	HIET DONDERO	. ~			
STREET ADDRESS			235	2 3 STREET ADDRESS 2 4 City-St-Zip		299	38 BAYWOOD LAN	ر ا	25H	3	
CITY-ST-ZIP			2.4			W	ESTER CHALET 'E	-L, 5	, 30 7	•	
TITLE		DEL	ETE 31T	ITLE					Change	Addition	
NAME			321	IAME			•				
STREET ADDRESS			3.3 9	STREET	ADDRESS						
CITY-ST-ZIP				CITY-S	ST-ZIP						
TITLE		☐ DEL	ETE 4.1 T	ITLE					Change	Addition	
NAME			4.2	NAME							
STREET ADDRESS			4.3 \$	STREET	ADDRESS						
CHY-SI-ZIP				CITY-S	ST-ZIP						
THLE		☐ DEL	ETE 5.1 T	TITLE					Change	Addition	
NAME			5.21	IAME							
STREET ADDRESS			5.3 \$	SIREET	ADDRESS						
CITY-ST-ZIP				CHTY-S	ST-ZIP	<u> </u>				····	
1111.1		DEL	ETE 6.1 T	TITLE					Change	Addition	
NAME			6.21	NAME							
STREET ADDRESS	1		6.3 9	STREET	T ADDRESS	Ì					
CHTY - ST - ZIP			6.4 (CITY-S	ST - ZIP	ļ					

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

Date 5-14-9 Dayline Phone B