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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000065422

1. Corporation Name

GEORGE PATTON INC

Principal P ace of Business	Mailing Address
10560 68TH AVENUE NORTH	10560 68TH AVENUE NORTH
SEMINOLE FL 33772	SEMINOLE FL 33772

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90001 002 ***150.00



Principal P ace of Business 10560 68TH AVENUE NORTH SEMINOLE FL 33772 2. Principal Place of Business 21 Allling Address SEMINOLE FL 33772 2. Principal Place of Business 2a. Mailing Address 25			eth			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 07/28/1997 4. FEI Number Aprilied For 59-3459713 Not Applicable					
Suite, Apt. #,	etc.	Suite, Apt. #, etc.				5 Certifo	ate of Status Desired				ditional
22	<u> </u>	27				J. Octure				ee Re	
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution			\$5.00 May Be Added to Fees		
Zip	Country	Zip	Cou	ntry			orporation owes the cur	rent vear in			
24	25	29	30	•			al Property Tax.	J	☐ Yes	s i	I No
	9. Name and Adcress of Currer					10. Name	and Address of New	Register∈d	Agent		
DATTO	N CCODCE			81	Name						
PATTON, GEORGE 10560 68TH AVENUE NORTH		,	82	Street Addr	ess (P.O. Bo) Number is Not Acceptable)		able)				
	OLE FL 33772			83							
					-				امدا	Zin C	-de
				84	City			FL	85	Zip C	Me
SIGNATUF:E	familiar with, and accept the obligation of the	nt and title if applicable. (NO	E: Registered		signature require	ed when reinstating)		DATE			
12.		DIRECTORS	13.			ADDITI	NS/CHANGES TO OF	FICERS A			
1 1 7)	☐ DÉLETE	1.1 TII						☐ Ch	ange	Addition
STREET ADDRESS 1	PATTON, GEORGE 10560 68TH AVENUE NORTH		1.2 NA 1.3 ST		ADDRESS						
	SEMINOLE FL 33772			TY-ST-	-ZIP				[] Ch		Addition
l 1 -)	☐ DELETE	2.1 111						Cn	ange	☐ Addition
	PATTON, MARSHA 10560 68TH AVENUE NORTH		2.2 NA		ADDRESS						
	SEMINOLE FL 33772		2.4 CI								
TITLE		☐ DELETE	3.1 ∏						☐ Ch	ange	Addition
NAME			3.2 NA	WE							
STREET ADDRESS			33 ST	REET	ADDRESS						
CITY-ST-ZIP		- <u>-</u> -		ITY-ST	-ZIP						□ A 3-20
TITLE		☐ DELETE	4.1 TIT						☐ Ch	ange	☐ Addition
NAME			. 4. 2 N								
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP		☐ DELETE	4.4 CF	TY-ST-	·ZIP				□ Ch	ange	Addition
TITLE		□ occeie	5.1 M							gv	
NAME STREET ADDRESS			1		ADDRESS						
1 1				TY-ST-							
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TIT						☐ Ch	ange	Addition
NAME			6.2 NA	ME	İ					-	
STREET ADDRESS			6.3 ST	REET	ADDRESS						
S.MCCI FODING 30			64.00	TV OT	7/5						

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 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 presence 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, with II other like empowered.

SIGNATURE: