2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P98000044796

1. Entity Name
BARON'S PATIO, INC.

Principal Place of Business	Mailing Address
10915 SE FEDERAL HWY HOBE SOUND, FL 33455	10915 SE FEDERAL HWY HOBE SOUND, FL 33455

04012006   No Chg-P   CRZE034 (11/05)

4. FEI Number 65-0849961	Applied For
	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PATTON, CRAIG
10915 SE FEDERAL HWY
HOBE SOUND, FL 33455

DO NOT WRITE
IN THIS SPACE

7. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2006 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	U00000492901 04/19/06-80084-009 150.00

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	PATTON, CRAIG
STREET ADDRESS	10915 SE FEDERAL HWY
CITY-ST-ZIP	HOBE SOUND, FL 33455

TITLE	
NAME	
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CITY-ST-ZIP	

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CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ CRAIG PATTON 4/1/6 772 546 9175

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #