

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000052688

Entity Name: P.A.T. AUTO TRANSPORT, INC.

FILED
Apr 19, 2005
Secretary of State

Current Principal Place of Business:

3191 W. NINEMILE RD.
PENSACOLA, FL 32534

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 37701
PENSACOLA, FL 32526

New Mailing Address:

FEI Number: 59-3580580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEDGES, TRACIE R
14425 INNERARITY POINT ROAD
PENSACOLA, FL 32507 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HEDGES, GEORGE G
Address: 3191 W. NINEMILE RD
City-St-Zip: PENSACOLA, FL 32534

Title: VP () Delete
Name: HEDGES, TRACIE R
Address: 3191 W. NINEMILE RD
City-St-Zip: PENSACOLA, FL 32534

Title: S () Delete
Name: HEDGES, TRACIE R
Address: 3191 NINEMILE RD
City-St-Zip: PENSACOLA, FL 32534

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: HEDGES, GREGORY A
Address: 3191 W. NINEMILE RD
City-St-Zip: PENSACOLA, FL 32534

Title: T (X) Change () Addition
Name: HEDGES, TRACIE R
Address: 3191 NINEMILE RD
City-St-Zip: PENSACOLA, FL 32534

Title: S () Change (X) Addition
Name: FORRET, TERI K
Address: 3191 W. 9 MILE ROAD
City-St-Zip: PENSACOLA, FL 32534

Title: VP () Change (X) Addition
Name: HEDGES, BRADLEY T
Address: 3191 W. 9 MILE ROAD
City-St-Zip: PENSACOLA, FL 32534

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRACIE R. HEDGES

T

04/19/2005

Electronic Signature of Signing Officer or Director

Date