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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$54722

1. Corporation Name

ANDRE J. PATRONE, P.A.

Principal	Place of	Business

Mailing Address

FILED Feb 15, 1999 8:00am **Secretary of State**

02-15-1999 90011 009 ***150.00



12685 NEW BRITTANY BLVD 12685 NEW BRITTANY BLVD FT MYERS FL 33907 FT MYERS FL 33907 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 05/23/1991 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-0264053 26 21 \$8,75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation owes the current year Intangible Country Country Zip Zip □No Personal Property Tax. 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PATRONE, ANDRE J Street Address (P.O. Box Number is Not Acceptable) 82 12685 NEW BRITTANY BLVD 83 FT MYERS FL 33907 85 84 City 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 of fice 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating). SIGNATURE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. Change DELETE 1.1 TITLE 250 **PST** TITLE 1.2 NAME PATRONE, ANDRE J NAME 12685 NEW BRITTANY BLVD 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY-ST-ZIP FT MYERS FL Addition CITY-ST-ZIP Change □ DELETE 2.1 TITLE TITLE 2.2 NAME PATRONE, ANDRE J NAME 2.3 STREET ADDRESS 12685 NEW BRITTANY BLVD STREET ADDRESS 2.4 CITY-ST-ZIP FT MYERS FL Change CITY-ST-ZIP ☐ DELETE 3.1 TITLE 3.2 NAME NAME · 55年。157月1日 - 151日 - 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change [Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP Addition CITY-ST-ZIP ☐ Change DELETE 5.1 TITLE TITLE 45.57 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP ☐ Addition CITY-ST-ZIP Change ☐ DELETE 6.1 TITLE TITLE 6.2 NAME

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 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 adachment with an address, with all other like empowered.

6.3 STREET ADORESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

FEMAME OF SIGNING OFFICER OR DIRECTOR

941-278-1800

CR2E034 (11/98)