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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V57280

(2)

PAT-WAY ENTERPRISE, INC.

Principal Place of Business Mailing Address

ROUTE 1 BOX 490 ROUTE 1 BOX 490

MADISON FL 32340 MADISON FL 32340-9406

## FILED Mar 06 1997 8:00am Secretary of State



						3. Date Incorporated or Qualified 08/13/1992	3a, Date of Last Report 08/05/1996
2. Principal F	Flace of Business	2a. Mailing	Address			4. FEI Number	Applied For
[1]		26	•			59-3136715	Not Applicat
Suite, Apt	#, etc		Suite, Apt. #, etc. 27 City & State			5. Certificate of Status Desired	\$9.75 Additional
City & Sta. <b>3</b> ]	le					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7 <sub>IP</sub>		Countr	у	8. This corporation has liability for inta	
4]	25	29		30			es 🗌 No
	9. Name and Address of	Current Registered A	gent		T	10. Name and Address of New Regis	lered Agent
KAUFFMAN, WAYNE ROUTE 1 BOX 490				82	81 Name 82 Street Address (P.O. Box Number is Not Acceptable)		
MADISON FL 32340			83		**************************************		
				84	City		FL 85 Zip Code
office or	t to the provisions of Sections 6 registered agent, or both, in th am familiar with, and accept th	e State of Florida. Such	n change was	authorized b	y the corp	corporation submits this statement for the purp poration's board of directors. I hereby accept the	iose of changing its registere ne appointment as registered
SIGNATURE	Signature, typical or printed name of regis	so red agent and rite if applicat	le (NO	ΓΕ Registered Αρ	jent signature	required when relinstating)	DATE
12.	,	RS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICER	
TITLE	PD		☐ DELETE	1.1 TITLE	ļ		Change Additi
N4ME	KAUFFMAN, WAYNE			1,2 NAME		•	
STREET ADDRESS	RT. 1 BOX 490			1,3 STREE	T ADDRESS		
CHY-ST-74P	MADISON FL 32340			1,4 CITY -	ST-ZIP		
TiTLE	STD		DELETE	2.1 TITLE			Change Addit
NAM:	KAUFFMAN, PATRICIA			2.2 NAME		•	
STREET ADDRESS	OT 4 BOY 466			2.3 STREE	T ADDRESS		
CHY - ST - ZIP	MADISON FL 32340			2 4 CITY			
TITLE	IN DIOON I E OPO IO		DELETE	31 TITLE			☐ Change ☐ Addite
NAME				3.2 NAME	3		
STREET A TORESS					T ADDRESS		
CITY -ST - 7-2	·		DELETE	3.4. CITY			Change Addit
11ft <del>f</del>			C" DEFEIR	. 4.1 TITLE			TH CHANGE THANK
NAME				4, 2 NAM			
STREET ADDRESS				4.3 STREE	T ADDRESS		
CITY - S1 - ZIP				4.4 CITY-	ST-ZIP		
TITLE			DELETE	5.1 TITLE			Change Addit
NAME				5.2 NAME			
STEEL LADERESS				5 3 STREE	T ADDRESS		
011Y - ST - ZiP				5.4 CITY-	ST - 7/P		
7111.6			DELETE	6.1 TITLE			Change Addit
NAME			-	6.2 NAME			<b>-</b>
					T ADDRESS		
STREET ADDRESS				1			
City-St-7if		and a substitution of the substitution of	dosa was seed	6.4 CITY		total in Pasting 440 07/01/0 Final Date 1	further continues as the
informati Lam an i	ion indicated on this annual rep	ort or supplemental ar ation or the receiver or	nual report is trustee empor	true and acc wered to exe	curate and	stated in Section 119.07(3)(i), Florida Statutes. I I that my signature shall have the same legal of report as required by Chapter 607, Florida Stat	ffect as if made under oath; t