

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR - 8 PM 2: 38

DOCUMENT # **V64459** (3)

1. Corporation Name
G. PATTON AVIATION, INC.

Principal Place of Business Mailing Address
1160 MONTEGO BAY DR. WEST **1160 MONTEGO BAY DR. WEST**
MERRITT ISLAND FL 32953 **MERRITT ISLAND FL 32953**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **09/11/1992** 3a. Date of Last Report **06/03/1994**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		59-3141565		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28		24		25	
Zip		Country		Zip		Country	
24		25		29		30	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HOPKINS, CHRISTOPHER D. 1160 MONTEGO BAY DR. WEST MERRITT ISLAND FL 32953				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent 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.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATTON, GILBERT, JR.	1.2 NAME	
STREET ADDRESS	1160 MONTEGO BAY DR W	1.3 STREET ADDRESS	
CITY- ST- ZIP	MERRITT ISLAND FL	1.4 CITY- ST- ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATTON, MARIAN	2.2 NAME	
STREET ADDRESS	1160 MONTEGO BAY DR W	2.3 STREET ADDRESS	
CITY- ST- ZIP	MERRITT ISLAND FL	2.4 CITY- ST- ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOPKINS, CHRISTOPHER D.	3.2 NAME	
STREET ADDRESS	1301 SEMINOLE BLVD.#112	3.3 STREET ADDRESS	
CITY- ST- ZIP	LARGO FL	3.4 CITY- ST- ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATTON, JOHN F.	4.2 NAME	
STREET ADDRESS	1160 MONTEGO BAY DR W	4.3 STREET ADDRESS	
CITY- ST- ZIP	MERRITT ISLAND FL	4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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, except, or in an attachment with an address.

SIGNATURE: Gilbert Patton Jr. Gilbert Patton Jr. 19 Feb. 1995 (407)452-6604
(Name) (Typed Name)