

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 15, 2005 08:00 AM
Secretary of State

DOCUMENT # F13056 1. Entity Name BURNEY SEPTIC TANK SERVICE, INC.	
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Principal Place of Business C/O JACKSON B BURNEY 24 PELLICER LANE SAINT AUGUSTINE, FL 32084	Mailing Address C/O JACKSON B BURNEY 24 PELLICER LANE SAINT AUGUSTINE, FL 32084
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03162005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2043897	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BURNEY, JACKSON B. 24 PELLICER LANE SAINT AUGUSTINE, FL 32084

**DO NOT WRITE
IN THIS SPACE**

8. 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, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BURNEY, JACKSON B 24 PELLICER LANE ST AUGUSTINE FL,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS BURNEY, EDISON M 24 PELLICER LANE ST AUGUSTINE FL,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BURNEY, EDISON M 24 PELLICER LN ST. AUGUSTINE, FL
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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04/15/05-80058-006 150.00

12. 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 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: J.B. Burney J. B. BURNEY 13 APR/05 904-839-2953
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #