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

PROFIT CORPORATION ANNUAL REPORT

1998



HI ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M79268

(2)

BURTON INSTRUMENT COMPANY, INC.

FILED Apr 21 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address		1 18010611 111 10010 10110 11010 01101 1011 0101	I MLEIT BIRTT BIRTT BIRTT RIRTT FARF
BURTON INST. CO RT 5 BOX 5724 5602-A NW 13TH ST LAKE BUTLER FI GAINESVILLE FL 32653 US				DO NOT WRITE IN THIS SPACE	
US				 Date Incorporated or Qualified 05/04/1988 	
2. Principal P	Place of Business	2a. Mailing Address 26	The second of the second secon	4. FEI Number 59-2866725	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stale	е	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Z(p)	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	
	g. Name and Address of Curre	ent Registered Agent	,	10. Name and Address of New Registe	red Agent
	RTON, LARRY D		81 Name	· · · · · · · · · · · · · · · · · · ·	
	5 BOX 5724		82 Street Addi	ress (P.O. Box Number is Not Acceptable)	
LAKE BUTLER FL 32054			83		
			83		i
			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.0!	02 and 607 1508 Florida Statu	tos, the above-named corr	poration submits this statement for the nurses	no of changing its socialored
Office of ri	egistered agent, or both, in the Stat m familiar with, and accept the obli	le o' Florida. Such change was :	authorized by the corporat	tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE	The same with and accept the opin	grifons of, coordinger, occurring	onda Statujes.		
SIGNATURE	Signature, typed or printed name of registered a	gent and tale if applicable (NOT	Fregistered Agent signature requir	red when reinstaling) DA	1 <u>E</u>
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TATLE	PUDTON LADDY D	☐ DELETE	1.1 THLE		Change Addition
NAME	BURTON, LARRY D.		1.2 NAME		
STREET ADORESS	RT 5 BOX 5724 LAKE BUTLER FL		1.3 STREET ADDRESS		ļ
CITY-ST-ZIP TITLE	D DOLLER PL	DELETE	1.4 CITY-ST-ZIP		Change Classifica
NAME	BURTON, MARSHA C.		2.1 TITLE		Change Addition
STREET ADDRESS	RT 5 BOX 5724		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE BUTLER FL		2 4 CITY-ST-ZIP		
TITLE	T	DELETE	31 lilli		Change Addition
NAME	BURTON, DONALD C.	•	3.2 NAME		
STREET ADDRESS	7654 SUNWOOD DR.		3.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		3.4. CITY - ST - ZIP		
TITLE		DOLLETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		L_ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CHY-ST-ZIP 6.1 TITLE		Change Addition
NAME		E beter	6.2 NAME		Change Chyonton
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby c	ortify that the information supplied o	with this filing does not qualify fo	or the exemption stated in t	Section 119.07(3)(i), Florida Statutes. I furthe	r certify that the information
officer or o	on this a nnual report of supplement	lat annual report is true and acc :eiver or trustee empowered to r	surate and that my signatur	re shall have the same legal effect as if made dired by Chapter 607, Florida Statutes; and th	under oath that Lamian