


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 11, 2005 8:00 am
Secretary of State

08-11-2005 90004 002 ****70.00

DOCUMENT # 706600	
1. Entity Name BARTON HOUSE INC.	

Principal Place of Business 803 RIDGE RD., APT. #3 LANTANA, FL 33462	Mailing Address 803 RIDGE RD., APT. #3 LANTANA, FL 33462
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300061078



2. Principal Place of Business 803 RIDGE RD Suite, Apt. #, etc. #7	3. Mailing Address 803 RIDGE RD Suite, Apt. #, etc. #7
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08052005 Chg-NP CR2E037 (10/03)

City & State LANTANA FL	City & State LANTANA FL
Zip 33462	Country U.S.A.
Zip 33462	Country U.S.A.

4. FEI Number 59-1289042	Applied For <input type="checkbox"/> Not Applicable
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6. Name and Address of Current Registered Agent GONZALEZ, JIMMY A. 803 RIDGE RD., APT. #7 LANTANA, FL 33462	
7. Name and Address of New Registered Agent Name GONZALEZ Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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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 JIMMY A GONZALEZ, PRESIDENT <small>Signature, typed or printed name of registered agent and title if applicable.</small>	8-6-05 <small>(NOTE: Registered Agent signature required when reinstating) DATE</small>

Filing Fee is \$61.25 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT BELL, BRIEN H 803 RIDGE RD # 3 LAKE WORTH, FL 33462 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT JIMMY A GONZALEZ 803 RIDGE RD # 7 LANTANA, FL 33462 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JUHANI, TUSA 803 RIDGE RD # 2 LANTANA, FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER JEANNINE L. GONZALEZ 803 RIDGE RD # 7 LANTANA, FL 33462 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BUCHER, SUSAN 803 RIDGE ROAD # 7 LANTANA, FL 33462 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 617, 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: JIMMY A GONZALEZ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	8-6-05 (360) 714-1406 <small>Date Daytime Phone #</small>