

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 16, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 706600**

1. Entity Name  
**BARTON HOUSE INC.**



Principal Place of Business  
**803 RIDGE RD, # 7  
LANTANA, FL 33462**

Mailing Address  
**803 RIDGE RD, # 7  
LANTANA, FL 33462**



01092008 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**59-1289042**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**GONZALEZ, JIMMY A.  
803 RIDGE RD., APT. #7  
LANTANA, FL 33462**

**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

*Jimmy Gonzalez*  
**Jimmy Gonzalez**

(NOTE: Registered Agent signature required when reinstating)

**1-14-08**

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
GONZALES, JIMMY A  
803 RIDGE RD, # 7  
LANTANA, FL 33462**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
GONZALES, JEANNINE  
803 RIDGE RD, # 7  
LANTANA, FL 33462**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SD  
BUCHER, SUSAN  
803 RIDGE ROAD # 7  
LANTANA, FL 33462**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

000000786490  
01/17/08-80040-026 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Gonzalez*  
**Jimmy Gonzalez**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**1-14-08 (561) 7141406**

Daytime Phone #