

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # 211085

1. Entity Name
BARTON HOTEL CORPORATION



Principal Place of Business
**740 SOUTH ANDREWS AVENUE
FT. LAUDERDALE, FL 33316**

Mailing Address
**740 SOUTH ANDREWS AVENUE
FT. LAUDERDALE, FL 33316**



01232006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0838321	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BIEGELSEN, JOSEPH
740 S. ANDREWS AVENUE
FORT LAUDERDALE, FL 33316**

**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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution, ☐

\$5.00 May Be
Added to Fees

1100000508641
04/28/06-80013-014 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BIEGELSEN, JOSEPH Z.
STREET ADDRESS	740 S. ANDREWS AVENUE
CITY-ST-ZIP	FT LAUDERDALE, FL
TITLE	VSD
NAME	BIEGELSEN, JEFFREY P.
STREET ADDRESS	740 S. ANDREWS AVENUE
CITY-ST-ZIP	FT LAUDERDALE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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 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.

JEFFREY P. BIEGELSEN

SIGNATURE: _____

VICE PRESIDENT

APR 10 2006

954-463-6581

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #