

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

**FILED**

**Jan 20 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **249214 (8)**  
1. Corporation Name  
**CARLTON BROS., INC**



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
**HARRY S CARLTON  
603 TEVER STREET  
PLANT CITY FL 33566**

2. Principal Place of Business 2a. Mailing Address  
**c/o HELEN B. CARLTON  
603 W. TEVER STREET  
PLANT CITY, FL 33566**

3. Date Incorporated or Qualified  
**07/12/1961**  
4. FEI Number  
**59-0929400**  
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
**CARLTON, HARRY S DECEASED 6/13/97  
603 W TEVER  
PLANT CITY FL 33566**

10. Name and Address of New Registered Agent  
81. Name  
**ROBERT C. CARLTON**  
82. Street Address (P.O. Box Number is Not Acceptable)  
**202 E. KNIGHTS GRIFFIN ROAD**  
84. City **PLANT CITY, FL** 85. Zip Code **33565**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Robert C. Carlton* (NOTE: Registered Agent signature required when reinstating) **1/15/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PRESIDENT
NAME	CARLTON, HARRY S	1.2 NAME	ROBERT C. CARLTON
STREET ADDRESS	603 W TEVER ST	1.3 STREET ADDRESS	202 E. KNIGHTS GRIFFIN ROAD
CITY-ST-ZIP	PLANT CITY, FL 00000	1.4 CITY-ST-ZIP	PLANT CITY, FL 33565
TITLE	D	2.1 TITLE	VICE PRESIDENT
NAME	CARLTON, ROBERT C.	2.2 NAME	PAMELA C. ANDERS
STREET ADDRESS	202 E. KNIGHTS GRIFFIN RD	2.3 STREET ADDRESS	585 ALLEN DRIVE
CITY-ST-ZIP	PLANT CITY, FL 00000	2.4 CITY-ST-ZIP	MERRITT ISLAND, FL 32952
TITLE	D	3.1 TITLE	
NAME	CARLTON, HELEN B	3.2 NAME	
STREET ADDRESS	603 W TEVER ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	PLANT CITY, FL 00000	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *HELEN B. CARLTON, SEC.-TREAS.* (813) 752-6257

CR2E034 (10/97)