FILED
Apr 06, 2004 08:00 AM
Secretary of State

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 445837

1. Entity Name
BURTON ELECTRONICS, INC.

Principal Place of Business	Mailing Address
1860 N PONCE DE LEON BLVD. ST. AUGUSTINE, FL 32084	1860 N PONCE DE LEON BLVD. ST. AUGUSTINE, FL 32084

DO NOT WRITE IN THIS SPACE

02162004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1508820

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. **Name and Address of Current Registered Agent**

MCCLURE, GEORGE
170-A MALAGA STREET
SAINT AUGUSTINE, FL 32084

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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 ______________________ DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

U00000104386
04/06/04-80008-018 150.00

10. OFFICERS AND DIRECTORS

TITLE	VPD
NAME	BURTON, MARION
STREET ADDRESS	1860 N PONCE DE LEON BLVD
CITY-ST-ZIP	SAINT AUGUSTINE, FL 32084
TITLE	PD
NAME	BURTON, ROBERT
STREET ADDRESS	1860 N PONCE DE LEON BLVD
CITY-ST-ZIP	SAINT AUGUSTINE, FL 32084
TITLE	ST
NAME	END, NATALIE A.
STREET ADDRESS	2751 RACE TRACK ROAD
CITY-ST-ZIP	SAINT AUGUSTINE, FL 32084
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 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 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.

SIGNATURE: Robert B. Burton Robert B. Burton 4/1/04 904-824-1541
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #