

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000115

FILED
Apr 02, 2009
Secretary of State

Entity Name: BARTON & ASSOCIATES OF DELAWARE, INC.

Current Principal Place of Business:

100 CUMMINGS CENTER, SUITE 213G
BEVERLY, MA 01915

New Principal Place of Business:

Current Mailing Address:

100 CUMMINGS CENTER, SUITE 213G
BEVERLY, MA 01915

New Mailing Address:

FEI Number: 04-3582777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: RYAN, THOMAS F
Address: 1201 JUPITER PARK DRIVE
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: BECKER, B. F
Address: 8600 WEST BRYN MAWR, SUITE 120N
City-St-Zip: CHICAGO, IL 60631

Title: T () Delete
Name: KELLY, JR., EDWARD P
Address: 100 CUMMINGS CENTER, SUITE 213G
City-St-Zip: BEVERLY, MA 01915

Title: D () Delete
Name: INDRESANO, ROBERT D
Address: 100 CUMMINGS CENTER, SUITE 213G
City-St-Zip: BEVERLY, MA 01915

Title: D () Delete
Name: RYAN, ADAM C
Address: 13460 OAKMEADE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: RYAN, THOMAS JR.
Address: 1330 WEST AVENUE, APT. #1003
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT D. INDRESANO

D

04/02/2009

Electronic Signature of Signing Officer or Director

Date