

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

03-06-2006 90020 015 \*\*\*150.00

**DOCUMENT # F13962**

1. Entity Name

M.F. BURGIN, INC.



Principal Place of Business

1305 WEST HAINES ST.  
P. O. BOX 2554  
PLANT CITY FL 33566-5025

Mailing Address

1305 WEST HAINES ST.  
P. O. BOX 2554  
PLANT CITY FL 33566-5025

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

3. Mailing Address

Suite, Apt. #, etc.

City & State

1st MOORE

CR2E034 (10/05)

4. FEI Number

59-2066063

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BURGIN, M. FLETCHER  
2829 E FOREST BROOK DR  
LAKELAND FL 33803

7. Name and Address of New Registered Agent

Name Burgin, M. Fletcher

Street Address (P.O. Box Number is Not Acceptable)

3504 JERNIGAN LANE

City

DOVER

FL

Zip Code

33527

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**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE VD ☐ Delete  
NAME BURGIN, THOMAS H  
STREET ADDRESS 1305 WEST HAINES ST.  
CITY-ST-ZIP PLANT CITY FL

TITLE PD ☐ Delete  
NAME BURGIN, M. FLETCHER  
STREET ADDRESS 1305 W MLK BLVD  
CITY-ST-ZIP PLANT CITY FL 33563

TITLE ST ☐ Delete  
NAME BURGIN, VIRGINIA K  
STREET ADDRESS 1305 W MLK BLVD  
CITY-ST-ZIP PLANT CITY FL 33563

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition  
NAME Burgin, Thomas H  
STREET ADDRESS 13210 THONOTOSASSA RD  
CITY-ST-ZIP DOVER FL 33527

TITLE VD ☒ Change ☐ Addition  
NAME Burgin, M. Fletcher  
STREET ADDRESS 3504 JERNIGAN LANE  
CITY-ST-ZIP DOVER FL 33527

TITLE ST ☒ Change ☐ Addition  
NAME Burgin, Virginia K.  
STREET ADDRESS 3504 JERNIGAN LANE  
CITY-ST-ZIP DOVER FL 33527

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE:

Thomas H. Burgin Thomas H. Burgin 2.25.06 813-752-2234

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #