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FILED
Mar 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **G31665** (4)

1. Corporation Name
BURTON'S ELECTRICAL SERVICE, INC.



Principal Place of Business

**126 STATE ROAD 13 NORTH
P.O. BOX 24028
JACKSONVILLE FL 32241**

Mailing Address

**126 STATE ROAD 13 NORTH
P.O. BOX 24028
JACKSONVILLE FL 32241-4028**

3. Date Incorporated or Qualified
04/04/1983

3a. Date of Last Report
04/16/1996

2. Principal Place of Business

21 **445 STATE RD. 13 N.**

Suite/Apt. #, etc.

22 **26-185**

City & State

23 **FRUIT COVE, FL.**

Zip

24 **32259-3538**

Country

25 **USA**

2a. Mailing Address

26 **P.O. Box 24028**

State, Apt. #, etc.

27

City & State

28 **JACKSONVILLE FL**

Zip

29 **32241**

Country

30 **USA**

4. FEI Number
59-2294242

Applied For
Not Applicable

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**BURTON, JONNIE H.
12632 REMLER DRIVE WEST
JACKSONVILLE FL 32223**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

11 TITLE ☐ DELETE

12 NAME ☐ DELETE

13 STREET ADDRESS ☐ DELETE

14 CITY-ST-ZIP ☐ DELETE

15 TITLE ☐ DELETE

16 NAME ☐ DELETE

17 STREET ADDRESS ☐ DELETE

18 CITY-ST-ZIP ☐ DELETE

19 TITLE ☐ DELETE

20 NAME ☐ DELETE

21 STREET ADDRESS ☐ DELETE

22 CITY-ST-ZIP ☐ DELETE

23 TITLE ☐ DELETE

24 NAME ☐ DELETE

25 STREET ADDRESS ☐ DELETE

26 CITY-ST-ZIP ☐ DELETE

27 TITLE ☐ DELETE

28 NAME ☐ DELETE

29 STREET ADDRESS ☐ DELETE

30 CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME ☐ Change ☐ Addition

13 STREET ADDRESS ☐ Change ☐ Addition

14 CITY-ST-ZIP ☐ Change ☐ Addition

15 TITLE ☐ Change ☐ Addition

16 NAME ☐ Change ☐ Addition

17 STREET ADDRESS ☐ Change ☐ Addition

18 CITY-ST-ZIP ☐ Change ☐ Addition

19 TITLE ☐ Change ☐ Addition

20 NAME ☐ Change ☐ Addition

21 STREET ADDRESS ☐ Change ☐ Addition

22 CITY-ST-ZIP ☐ Change ☐ Addition

23 TITLE ☐ Change ☐ Addition

24 NAME ☐ Change ☐ Addition

25 STREET ADDRESS ☐ Change ☐ Addition

26 CITY-ST-ZIP ☐ Change ☐ Addition

27 TITLE ☐ Change ☐ Addition

28 NAME ☐ Change ☐ Addition

29 STREET ADDRESS ☐ Change ☐ Addition

30 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do 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: *Jonnie H. Burton* **JONNIE H. BURTON**

3-18-97 **804-262-6186**

CR2E034 (9/96)