

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H22785

FILED  
Feb 28, 2011  
Secretary of State

**Entity Name:** BURCH LABORATORY, INC.

**Current Principal Place of Business:**

BILLY BRYAN BURCH  
2151 EAST NINE MILE RD.  
PENSACOLA, FL 32514

**New Principal Place of Business:**

**Current Mailing Address:**

BILLY BRYAN BURCH  
2151 EAST NINE MILE RD.  
PENSACOLA, FL 32514

**New Mailing Address:**

**FEI Number:** 59-2449605      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BURCH, BILLY BRYAN  
2151 E. NINE MILE RD.  
PENSACOLA, FL 32514      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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BURCH, BILLY BRYAN  
Address: 2151 E. NINE MILE RD.  
City-St-Zip: PENSACOLA, FL 32514

Title: V  
Name: BURCH, LINDA H.  
Address: 9330 SCENIC HWY.  
City-St-Zip: PENSACOLA, FL 32514

I hereby 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 all other like empowered.

SIGNATURE: BII B. BURCH

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

PRES

02/28/2011

\_\_\_\_\_ Date