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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **H86198**

1. Corporation Name

BURTON	FENCE, INC.								
Principal Place	of Business	Mailing Address						Alait ajait alait	Albis astsi rati
C/O ROBERT L. BURTON 1900-34 ST SOUTH ST. PETERSBURG FL 33711-3201 C/O ROBERT L. BURTON 1900-34 ST SOUTH ST. PETERSBURG FL 33711-3201 ST. PETERSBURG FL 33711-3201			01			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/20/1985			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		A	pplied For
21	-	26				59-26177 <u>94</u>		N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desire	d 🗆		Additional
22		27				Or Commente of Challes Books	- <u>-</u>		equired
City & State		City & State	¬ ••••			Election Campaign Finance Trust Fund Contribution	ing 🗆		May Be to Fees
Zip	Country Zip C			гу		8. This corporation owes the	current year Ir		
24	25 29 30					Personal Property Tax.		Yes	No
	9. Name and Address of Current	Registered Agent				10. Name and Address of Ne	w Registered	Agent	
en ind	TON FILENII		8	1 (Name				
BURTON, ELLEN H. 1900-34TH ST. SO			8:	2 3	Street Addres	ss (P.O. Box Number is Not Acc	eptable)		
ST. PETERBURG FL 33711			8	3					
					<u> </u>			. [85 Zip	Code
				l	City		FI	- [['	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered					gnature required		DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO	OFFICERS A		
TITLE	PTD DELETE 1.1			Ē				☐ Change	☐ Addition
NAME	BURTON, ELLEN H. 12			E					
STREET ADDRESS	5298-16TH AVE. NO. 1.3			ETAL	DORESS				
CITY-ST-ZIP	01.12.21.000110.12		1.4 CITY-		DP			E) Chance	Addition
TITLE	V3D —		2.1 TITLE					Change	
NAME	BURTON, ROBERT L.		2.2 NAME						
STREET ADDRESS	\$250 TOTAL TITLE THE		2.3 STRE		- 1				į
CITY-ST-ZIP	71.72.27.000.10		2.4 CITY		Z3P			Change	Addition
TITLE	0	☐ DÉLETE	3.1 TITLE				-	Contange	
NAME	SCHWANKOFF, JAMES R	March 1994 - The	3.2 NAME	_		40 3. 1			1
STREET ADDRESS	1900 34TH STREET SOUTH	•	3.3 STRE		- 1				
CITY-ST-ZIP	ST PETERSBURG FL	X €0ELETE	3.4. CITY 4.1 TITLE		ZIP			[] Change	Addition
TITLE	D	Poccere			-			<u></u>	
NAME	COWAN, ALBRAHAM		4. 2 NAM		200500				
STREET ADDRESS	3010 38TH AVE N		4.3 STRE						
CITY-ST-ZIP	ST PETERSBURY GL	DELETE	4.4 CITY-		.IP			Change	Addition
TITLE		- Acces	5.1 TITLE						
NAME STREET ADDRESS			5.3 STRE		DDRESS				

CITY-ST-ZIP 14. 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 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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY- ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

NAME

DELETE

Change

☐ Addition