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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J91216

1. Corporation Name

DANIEL H. BARRON, P.A.

Principal Place of Business

 1675 FERN AVENUE
 BIG PINE KEY FL 33043-9803
 US

Mailing Address

 1675 FERN AVENUE
 BIG PINE KEY FL 33043-9803
 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/02/1987

4. FEI Number

59-2841101

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

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9. Name and Address of Current Registered Agent

 BARRON, DANIEL H.
 RR 3, FERN AVENUE
 EDEN PINE COLONIES, 3RD ADDITION
 BIG PINE KEY FL 33043

10. Name and Address of New Registered Agent

 81 Name **BARRON DANIEL H**
 82 Street Address (P.O. Box Number is Not Acceptable)
1675 FERN AVE
 83
 84 City **Big Pine Key** FL 85 Zip Code **33043**

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 607.0805, Florida Statutes.

SIGNATURE **DANIEL H. BARRON****DH Barron****1/2/99**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

 TITLE **D** ☐ DELETE
 NAME **BARRON, DANIEL H.**
 STREET ADDRESS **RR 3, FERN AVENUE**
 CITY-ST-ZIP **BIG PINE KEY FL**

 TITLE **PST** ☐ DELETE
 NAME **BARRON, DANIEL H.**
 STREET ADDRESS **RR 3, FERN AVENUE**
 CITY-ST-ZIP **BIG PINE KEY FL**

 TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

 TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

 TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

 TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

 1.1 TITLE **D** ☐ Change ☐ Addition
 1.2 NAME **BARRON DANIEL H**
 1.3 STREET ADDRESS **1675 FERN AVE**
 1.4 CITY-ST-ZIP **BIG PINE KEY, FL 33043**

 2.1 TITLE **PST** ☐ Change ☐ Addition
 2.2 NAME **BARRON DANIEL H**
 2.3 STREET ADDRESS **1675 FERN AVE**
 2.4 CITY-ST-ZIP **BIG PINE KEY FL 33043**

 3.1 TITLE ☐ Change ☐ Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

 4.1 TITLE ☐ Change ☐ Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

 5.1 TITLE ☐ Change ☐ Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

 6.1 TITLE ☐ Change ☐ Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 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.

SIGNATURE:

Daniel H. Barron
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #