

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 21, 2006 8:00 am**  
**Secretary of State**

02-21-2006 90018 041 \*\*\*150.00

**DOCUMENT # M48134**

1. Entity Name

**BARTON INVESTMENT COMPANY**



Principal Place of Business

% BESSEMER TRUST COMPANY  
100 WOODBRIDGE CENTER DRIVE  
WOODBIDGE, NJ 07095

Mailing Address

BESSEMER TRUST CO ATTN ANGELO  
CAMPANILE 100 WOODBRIDGE CTR DR  
WOODBIDGE, NJ 07095

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01252006

Chg-P

CR2E034 (11/05)

4. FEI Number  
**59-2796879**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYES STREET  
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME KIESEWETTER, JAYNE BARTON  
STREET ADDRESS MEADOWBROOK #C-104 13254 POLO CLUB RD  
CITY-ST-ZIP W PALM BEACH, FL ☐ Delete

TITLE VD  
NAME GERSTEIN, HERBERT  
STREET ADDRESS 111 E. SHORE RD.  
CITY-ST-ZIP MANHASSET, NY ☒ Delete

TITLE STD  
NAME ARCELLA, DAVID  
STREET ADDRESS BESSEMER TRUST COMPANY 630 FIFTH AVE,  
CITY-ST-ZIP NEW YORK, NY 10111 ☐ Delete

TITLE VD  
NAME CAMPANILE, ANGELO, D  
STREET ADDRESS %BESSEMER TRUST CO 100 WOODBRIDGE CTR DR  
CITY-ST-ZIP WOODBRIDGE, NJ 07095 ☐ Delete

TITLE SD  
NAME BARTON, SHARI  
STREET ADDRESS 2920 UPTON ST, NW  
CITY-ST-ZIP WASHINGTON, DC ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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

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

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**DAVID J. ARCELLA**

**01/30/06**

Date

Daytime Phone #