2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 01, 2005 08:00 AM DOCUMENT # N96000002982 **Secretary of State** 1. Entity Name BARTON FARMS ASSOCIATION, INC. Principal Place of Business Mailing Address 4127 BEE RIDGE ROAD SARASOTA FL 34233 4127 BEE RIDGE ROAD SARASOTA FL 34233 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State 4. FEI Number Applied For City & State 65-0692669 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FISCHER, RICHARD M 4127 BEE RIDGE ROAD Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34233 City 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 signalura required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Addition TITLE Detete Mile ☐ Change HORTON, REX S NAME NAME 4127 BEE RIDGE ROAD STREET ADORESS STRUET ADDRESS CITY-ST ZIP SARASOTA FL 34233 Critisi alt VPD Change Addition TiTLE atte ☐ Delete HORTON, HOWARD P NAME NAME U00000247563 4127 BEE RIDGE ROAD STREET ADDRESS STREET ADDRESS 03/01/05-80026-016 70.00 SARASOTA FL 34233 CHY SI-ZIP CITY ST-ZIP Tritt Change Addition DILLE Delete DUMBAUGH, JOHN D NAME NAME 1900 RINGLING BOULEVARD STREET ADDRESS STREET ADDRESS SARASOTA FL 34236 City-St-ZiP CITY - ST - ZIP Change ☐ Addition THE ☐ Defete fricê MAME NAME STREET ALIGNESS STREET ADDRESS CITY ST ZIP CITY ST ZIP TITLE Change ☐ Addition ☐ Delete HIENAME NANA STREET ADERECS STREET ADDRESS CHY ST ZIF CITY-ST ZIP ☐ Delete Change ☐ Addition LHE Tillia NAME NAME STREET AUDINESS. STREET ADDRESS CITY ST ZIE CITY SI-ZIP

12. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119 07(3)(i), 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 of trustee empowered to execute this report as required by Chapter 617, 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:

PEX S. HORTON 2/16/05 371-7000

FILED