

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 15, 2005  
Secretary of State**

DOCUMENT# P02000100181

Entity Name: BARRON PROPERTIES, INC

**Current Principal Place of Business:**

1620 NW 66TH TERRACE  
GAINESVILLE, FL 32605 US

**New Principal Place of Business:**

**Current Mailing Address:**

1620 NW 66TH TERRACE  
GAINESVILLE, FL 32605 US

**New Mailing Address:**

FEI Number: 74-3061953      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BARRON, ROBERT D  
2226 E SILVER SPRINGS BLVD.  
OCALA, FL 34470 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: BARON, ANNETTE  
Address: 1620 NW 66 TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: P ( ) Delete  
Name: BARRON, ROBERT A  
Address: 1620 NW 66 TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: BARRON, ROBERT D  
Address: 1620 NW 66 TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT D. BARRON

P

03/15/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date