

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000112780

1. Entity Name
GEORGE BURTON CONSTRUCTION INC



Principal Place of Business
**1 SUNNY ROAD
ORMOND BEACH, FL 32174**

Mailing Address
**1 SUNNY ROAD
ORMOND BEACH, FL 32174**



03112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0344638

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BURTON, VINNA
1 SUNNY ROAD
ORMOND BEACH, FL 32174**

**DO NOT WRITE
IN THIS SPACE**

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

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04/30/08-80023-010 150.00

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	BURTON, GEORGE F III
STREET ADDRESS	1 SUNNY ROAD
CITY- ST- ZIP	ORMOND BEACH, FL 32174
TITLE	S
NAME	PATTON, RANDOLPH E
STREET ADDRESS	115 BREEZE HILL LANE
CITY- ST- ZIP	PALM COAST, FL 32137
TITLE	VPD
NAME	BURTON, VINNA M
STREET ADDRESS	1 SUNNY ROAD
CITY- ST- ZIP	ORMOND BEACH, FL 32174
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *George Burton*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE BURTON X

Date

Daytime Phone #

(386) 676-2837