

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000116349

1. Entity Name
THE BARTER COMPANY, INC.



Principal Place of Business

244 SHOPPING AVE #267
SARASOTA, FL 34237

Mailing Address

244 SHOPPING AVE #267
SARASOTA, FL 34237

FILED

06 SEP 19 PM 4:50

SEC. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.



09152006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
74-3106511

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

EILERS, BRENDA
2844 BAY ST
SARASOTA, FL 34237

**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
Due by September 15, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	EILERS, BRENDA
STREET ADDRESS	244 SHOPPING AVE #267
CITY-ST-ZIP	SARASOTA, FL 34237
TITLE	T
NAME	SIDELL, SANDRA
STREET ADDRESS	15 BOWER RD #F5
CITY-ST-ZIP	QUINCY, MA 02169
TITLE	D
NAME	SIDELL, SCOTT
STREET ADDRESS	244 SHOPPING AVE # 267
CITY-ST-ZIP	SARASOTA, FL 34237
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

900080389469
10/03/06--01033--012 **150.00

**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:

Brenda Eilers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/15/06 9413662004

Date Daytime Phone #