

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000058495

FILED
Aug 16, 2005
Secretary of State

Entity Name: BURTON INSURANCE SERVICES, INC.

Current Principal Place of Business:

650 FOUNTAINHEAD LN
NAPLES, FL 34103

New Principal Place of Business:

5100 TAMIAMI TRAIL N
SUITE 130
NAPLES, FL 34103

Current Mailing Address:

650 FOUNTAINHEAD LN
NAPLES, FL 34103

New Mailing Address:

5100 TAMIAMI TRAIL N
SUITE 130
NAPLES, FL 34103

FEI Number: 13-4280720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURTON, KATHLEEN D
650 FOUNTAINHEAD LN
NAPLES, FL 34103 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

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BURTON, KATHLEEN D
Address: 50 FOUNTAINHEAD LN
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BURTON, KATHLEEN D
Address: 650 FOUNTAINHEAD LN
City-St-Zip: NAPLES, FL 34103

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: KATHLEEN DERUM BURTON

P

08/16/2005

Electronic Signature of Signing Officer or Director

Date