
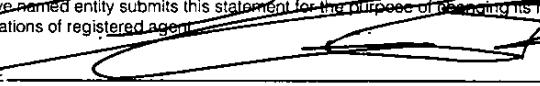


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90042 017 ***150.00

DOCUMENT # P04000122824 1. Entity Name BURTON REAL ESTATE HOLDINGS, INC.					
Principal Place of Business 6550 N. WICKHAM RD., STE. 7 MELBOURNE, FL 32940			Mailing Address 6550 N. WICKHAM RD., STE. 7 MELBOURNE, FL 32940		
2. Principal Place of Business 3999 N. Harbor City Blvd		3. Mailing Address 3999 N. Harbor City Blvd			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Melbourne FL		City & State Melbourne FL			
Zip FL 32935		Zip FL 32935			
4. FEI Number 34-2011506			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent MILLER, ALLEN 2087-A SARNO RD. MELBOURNE, FL 32935			7. Name and Address of New Registered Agent Name Christopher Burton Street Address (P.O. Box Number is Not Acceptable) 4235 Lake Washington Rd City Melbourne FL Zip Code 32934		
8. The above named entity submits this statement for the purpose of becoming its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> SIGNATURE  </div> <div style="width: 45%;"> Christopher Burton 1/24/06 <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> </div>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURTON, CHRIS 6550 N. WICKHAM RD., STE. 7 MELBOURNE, FL 32940	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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 an other like empowered			Christopher Burton 1/24/06 (321)757-3247		
SIGNATURE:			SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		

600008110



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