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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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DIVISION OF CORPORATIONS
95 JUN -1 PM 3:12

DOCUMENT # **P94000090586 (6)**

1. Corporation Name
R. K. BURNS INC.

Principal Place of Business	Mailing Address
6300 30TH ST. SOUTH ST. PETERSBURG FL 33712	6300 30TH ST. SOUTH ST. PETERSBURG FL 33712

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/13/1994**
3a. Date of Last Report: 12/13/94

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 59-3253696 ☐ Applied For ☐ Not Applicable

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

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

8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DIMARCO, ROBERT F CPA
3440 E. LAKE RD., SUITE 104
PALM HARBOR FL 34685

10. Name and Address of New Registered Agent

81 Name: ~~BRIAN K. DICKHAUS C.P.A.~~ ROBERT D. B. BURNS
82 Street Address (P.O. Box Number is Not Acceptable): ~~9610 EXECUTIVE CENTER DRIVE N. SUITE 103~~
83: 6200 30TH STREET SOUTH
84 City: ST PETERSBURG **FL** 85 Zip Code: 33712

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] 5/31/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BURNS, ROBERT D 3440 E. ALKE ROKAD #104 PALM HARBOR FL 34685	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	~~Burns Robert D~~ BURNS ROBERT D, JR. 6200 30TH STREET SOUTH ST PETERSBURG, FL 33712	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BURNS, KATHLEEN JO 3440 E. ALKE ROKAD #104 PALM HARBOR FL 34685	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	D BURNS KATHLEEN JO 6200 30TH STREET SOUTH ST PETERSBURG, FL 33712	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] ROBERT D. B. BURNS 5/31/1995 (813) 864-5152
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0448847 FP