


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 30, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P95000027084**  
 1. Entity Name  
**BURKHOWIES, INC.**



Principal Place of Business      Mailing Address  
**8201 HWY. 301 S.**      **P.O. BOX 1578**  
**RIVERVIEW, FL 33569**      **RIVERVIEW, FL 33569 US**

**DO NOT WRITE IN THIS SPACE**



03192005    No Chg-P    CR2E034 (11/05)  
 4. FEI Number      Applied For  
**59-3308631**      Not Applicable  
 5. Certificate of Status Desired        \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**HOWERTON, DALE**  
**3422 HOLLAND DR.**  
**BRANDON, FL 33511**

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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 *Dale Howerton Dale Howerton*      *3-27-06*  
Signature, typed or printed name of registered agent and title if applicable      (NOTE: Registered Agent signature required if changing office or agent)      DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HOWERTON, DALE A
STREET ADDRESS	3422 HOLLAND DR
CITY-ST-ZIP	BRANDON, FL 33511
TITLE	VPD
NAME	BURKETT, CHESTER W
STREET ADDRESS	1431D SALEM RD
CITY-ST-ZIP	DOVER, FL 33527
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: *Dale Howerton Dale Howerton/President*      *3-27-06*      *813-643-2980*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #