FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000034954 1. Corporation Name

R. & V. BURTON INC.

Principal Place of Business Mailing Address					I \$00\$1000{ 110 \$000} 0\$11\$ 081\$1 00\$11 00\$11 00\$11	THE BIBIN INTO	MILLI MINI SMAL
·		1274 SORRENTO WOODS BL	BLVD.				
NOKOMIS FL 34274		NOKOMIS FL 34274		DO NOT WRITE IN THIS	CDACE		
					DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE	
					05/04/1995		
2 Principal P	ace of Rusiness	2a. Mailing Address			4. FEI Number	— Ar	optied For
2. Principal Place of Business 2a. N			1		65-0662486	⊢	ot Applicable
		Suite, Apt. #, etc.			_	\$8.75	Additional
		27	27		5. Certifcate of Status Desired	Fee Re	quired
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28		Trust Fund Contribution	Added t	to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year in		
24	25	29 3	0		Personal Property Tax.		√No
	9. Name and Address of Curre	ent Registered Agent	81	Name	10. Name and Address of New Registered	Agent	
RUR	TON, RICHARD		0.	Mairie			
1274 SORRENTO WOODS BLVD.			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
NOKOMIS FL 34274			83				
			84	City	FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	, the above	l e-named coп	poration submits this statement for the purpose of	changing its	registered
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was auti	norized by	the corporati	ion's board of directors. I hereby accept the appo	ntment as re	gistered
=	in lassillar with, and accept the oblig	pations of, dection our loods, rions	ia Cialulos	•			{
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: R	egistered Ager	nt signature require	ed when reinstating) DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AT		
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	BURTON, RICHARD		1.2 NAME				1
STREET ADDRESS	1274 SORRENTO WOODS BL	.VD.	1.3 STREE	TADDRESS			
CITY-ST-ZIP	NOKOMIS FL 34274		1.4 CITY-S	T-ZIP		☐ Change	Addition
TITLE		☐ DELETE	2.1 TITLE			Change	[_] Addidon
NAME			2.2 NAME			£	
STREET ADDRESS			2.3 STREE				
CITY-ST-ZIP		☐ DELETE	2.4 CITY-S 3.1 TITLE	ST-ZIP		Change	Addition
TITLE		- DELECT			- •	- Tannage	
NAME			3.2 NAME	T ADDRESS			
STREET ADDRESS			3.4. CITY-5				
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	SI-ZIP		☐ Change	Addition
NAME		23 2422.14	4. 2 NAME			_ ,	_
STREET ADDRESS			1	T ADDRESS			
			4.4 CITY-S				
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			52 NAME				ı
STREET ADDRESS			5.3 STREE	TADDRESS		•	ı
CITY-ST-ZIP			5.4 CITY-\$	IT-ZIP			

1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 this 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, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

SIGNATURE:

TMLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change

Addition

FILED

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90156 004 ***150.00