2008 FOR PROFIT CORPORATION

Apr 01, 2008 08:00 AN Secretary of State ANNUAL REPORT **DOCUMENT # P95000034954** R. & V. BURTON INC. Mailing Address Principal Place of Business P.O. BOX 826 TWIN LAKES AVE NOKOMIS, FL 34274 1280 NOKOMIS, FL 34275 03272008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0662486 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BURTON, RICHARD 617 MIRO CIR. NOKOMIS, FL 34274 IN THIS SPACE 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. (NOTE: Registered Agent aignature required when reinstating) 9. Election Campaign Financing \$5.00 May Be 'FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. BURTON, RICHARD NAME 1274 SORRENTO WOODS BLVD. STREET ADDRESS NOKOMIS, FL 34274 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not quality 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 of changed, or on an attachme

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED