## 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 # P96000071277

1. Corporation Name

## Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90086 006 \*\*\*150.00

BURTON	WEDD, INC.											
Principal Place	of Business	Maili	ng Address					t indianat tra tatin atter anter anter	L SONTE CONTRACTOR	<b>88</b> ) 11 <b>8</b> 18 (181) (		
3770 BONNER ROAD 3770 BONNER ROAD							1					
PENSACOLA FL 32503 PENSACOLA FL 32503								DO NOT WRIT	E IN THIS	CDACE		
	·						}	3. Date Incorporated or Qualifed	E IN 11113	3FAUL		1
								08/20/1996				
Principal Place of Business								4. FEI Number		I Ap	plied For	1
· ·	ace of business	<b>—</b>	26					59-3399901		<del></del>	t Applicable	
Suite, Apt.	# etc	-	Suite, Apt. #, etc.							\$8.75		1
22	., 5.5.	<u> </u>	27.				بسست	5. Certificate of Status Desired	<u> </u>	Fee Re	quired	1
City & State	8		City & State					6. Election Campaign Financing	П	\$5.00	May Be	
23		28						Trust Fund Contribution	ш	Added t	o Fees	1
Zip	Country	z	lip		untry			8. This corporation owes the curre	nt year Inta		ed	
24	25	29		30				Personal Property Tax.		☐ Yes	Mo	
	9. Name and Address of Curre	nt Registe	red Agent		81	Nomo		10. Name and Address of New R	egisterea A	Agent		1
WED	B, JOHN K III				01	Name						
3770 BONNER ROAD					82 Street Address			s (P.O. Box Number is Not Accepta	ble)			ì
	SACOLA FL 32503				83		•					1
	5,1002112 02000				63							
					84	City			FL	85 Zip (	Code	
44 0	to the provinings of Sections 607 05	02 and 607	1508 Florida Statut	es the	above	-named	comor	ation submits this statement for the	ournose of o	hanging its	registered	1
office or e	opictored agent or both in the State	SUBULT TO E	Such change was a	uinonze	an nv	те соги	oration'	's board of directors. I hereby accep	the appoin	itment as re	gistered	
`agent. I a	m familiar with, and accept the oblig	ations of, S	ection 607.0505, FIG.	noa Sta	tutes					•		
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if a	nnlicable (NOTE	: Register	ed Agen	t signature r	w beriupe	vhen reinstating)	DATE			ءَ ا
12.	OFFICERS A			13				ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTO		] §
TITLE	D		☐ DELETE	1.1	TITLE					☐ Change	Addition	Ì
NAME	Burton, Kenneth W			1.2	NAME							5
· STREET ADDRESS	324 BROOKS STREET			1.3	STREET	ADDRESS						ļ
CITY-ST-ZIP	FORT WALTON BEACH FL 32	548		1.4	CITY-S1	F-ZIP				a.		فِ إ
TITLE	D		□ DELETE	2.1	TITLE					Change	☐ Addition	`
NAME	WEBB, JOHN K III			2.2	NAME							
STREET ADDRESS	3770 BONNER ROAD			2.3	STREET	ADDRESS						
CITY-ST-ZIP	PENSACOLA FL 32503				CITY-S	T-ZIP	<b> </b>			☐ Change	Addition	
TITLE	•		DELETE"	1	TITLE							1
NAME				1	NAME 							
STREET ADDRESS						ADDRESS						1
Crty-ST-ZIP			☐ DELETE		CITY-S	i-ZIP	$\vdash$			Change	☐ Addition	1
TITLE			O presid								_	
NAME					NAME	ADDRESS						
STREET ADDRESS					CITY-S							
CITY-ST-ZIP TITLE			☐ DELETE		IIILE	· - ZII				Change	Addition	1
NAME			'		NAME	į						1
STREET ADDRESS		,				ADDRESS						
CITY-ST-ZIP				5.4	CITY-S'	T-ZIP	[					]
TITLE			☐ DELETE	6.1	TITLE		1			Change	☐ Addition	
NAME				6.2	NAME							
STREET ADDRESS				6.3	STREET	TADDRESS						l
	ı			1	CITY-S	T. 7IP						1

CITY-ST-ZIP 14. I 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.

SIGNATURE:

850-434-5449