## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000099876

**Entity Name:** LINTON MANAGEMENT, INC.

FILED Jan 07, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**Current Principal Place of Business: New Principal Place of Business:** 

10000 US HIWAY 98 NO., #955 2914 DOLLAR BONNET LANE LAKELAND, FL 33809

LAKELAND, FL 33810

**Current Mailing Address: New Mailing Address:** 

10000 US HIWAY 98 NO., #955 2914 DOLLAR BONNET LANE

LAKELAND, FL 33809 LAKELAND, FL 33810

FEI Number: 55-2135880 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BONIFIELD, EUGENE L BONIFIELD, EUGENE L 10000 US HIWAY 98 NO., #955 2914 DOLLAR BONNET LANE LAKELAND, FL 33809 LAKELAND, FL 33810

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.

SIGNATURE: 01/07/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

( ) Delete Title: (X) Change ( ) Addition

BONIFIELD, EUGENE L BONIFIELD, EUGENE L Name: Name: 10000 US HIWAY 98 NO., #955 2914 DOLLAR BONNET LANE Address: Address:

City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33810

Title: (X) Change ( ) Addition Title: () Delete Name: BONIFIELD, EUGENE L Name: BONIFIELD, EUGENE L 10000 US HWY 98 N., #955 2914 DOLLAR BONNET LANE Address: Address: LAKELAND, FL 33809 LAKELAND, FL 33810 City-St-Zip: City-St-Zip:

Title: Title: SECT ( ) Delete SECT (X) Change ( ) Addition BONIFIELD, JOANNE M Name: BONIFIELD, JOANNE M Name:

10000 US HWY 98 N., #955 2914 DOLLAR BONNET LANE Address: Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33810

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EUGENE L. BONIFIELD **PRES** 01/07/2005