

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000080696

1. Entity Name

DON BARTON & ASSOCIATES, INC.

FILED

Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90065 029 ***150.00

Principal Place of Business

5013 ORTEGA FOREST DRIVE
JACKSONVILLE FL 32210

Mailing Address

5013 ORTEGA FOREST DRIVE
JACKSONVILLE FL 32210

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3604306

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DOYLE, WILLIAM E ESQ.
2002 SOUTHSIDE BOULEVARD
SUITE 201
JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name Donald E. Barton

Street Address (P.O. Box Number is Not Acceptable)

5013 Ortega Forest Drive
City Jacksonville FL Zip Code 32210

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.

SIGNATURE Donald E. Barton DONALD E. BARTON

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/19/01
DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☒
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME BARTON, DON
STREET ADDRESS 5013 ORTEGA FOREST DRIVE
CITY-ST-ZIP JACKSONVILLE FL 32210

TITLE SECRETARY ☐ Delete
NAME SHIRLEY H. BARTON
STREET ADDRESS 5013 ORTEGA FOREST DR
CITY-ST-ZIP JACKSONVILLE FL 32210

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donald E. Barton DONALD E. BARTON, PRES.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/01
Date

904 389 6976
Daytime Phone #

CR2E034 (10/00)