

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L09809

**FILED  
Mar 17, 2017  
Secretary of State  
CC8116948761**

**Entity Name:** BARRON'S OF TRENTON, INC.

**Current Principal Place of Business:**

4539 SOUTHWEST COUNTY ROAD 341  
BELL, FL 32619

**Current Mailing Address:**

4539 SOUTHWEST COUNTY ROAD 341  
BELL, FL 32619

**FEI Number:** 65-0136803

**Certificate of Status Desired:** No

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

BARRON, JOSEPH H  
4539 SW CR 341  
BELL, FL 32619 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name BARRON, MARY J.  
Address 4539 SW. CR.341  
City-State-Zip: BELL FL 32619

Title SVT  
Name BARRON, JOSEPH H.  
Address 4539 SW. CR. 341  
City-State-Zip: BELL FL 32619

Title OFFICER  
Name BARRON, JOSHUA NEALE  
Address 4539 SOUTHWEST COUNTY ROAD  
341  
City-State-Zip: BELL FL 32619

Title OFFICER  
Name BARRON, CARROLL D  
Address 4539 SOUTHWEST COUNTY ROAD  
341  
City-State-Zip: BELL FL 32619

*I hereby 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 all other like empowered.*

**SIGNATURE:** JOSEPH BARRON

VP

03/17/2017

Electronic Signature of Signing Officer/Director Detail

Date