2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Jan 12, 2005 8:00 am **Secretary of State DOCUMENT # 437052** 1. Entity Name 01-12-2005 90013 036 ***150.00 BILL BENHART, INC. Principal Place of Business 4564 JONATHAN CREEK RD. 4564 JONATHAN CREEK RD. WAYNESVILLE, NC 28785 US WAYNESVILLE, NC 28785 US 01052005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1492346 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent REVELIA, SÙSAN DO NOT WRITE 1440 WISCONSIN AVENUE PALM HARBOR, FL 34683 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. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 - Added to Fees 10. COFFICERS AND DIRECTORS TITLE BENHART, MARVIN W NAME STREET ADDRESS 135 SOUTHERN WAY CITY-ST-ZIP WAYNESVILLE, NC TITLE BENHART, RONALD F NAME STREET ADDRESS 149 PINCREST LANE CITY-ST-ZIP WAYNESVILLE, NC 28785 TITLE AS LANCE, SUSAN NAME STREET ADDRESS 370 N. MAIN ST DO NOT WRITE CITY-ST-ZIP WAYNESVILLE, NC 28786 IN THIS SPACE MELISSA BENHART NAME 149 PINECREST LANE STREET ADDRESS WAYNESVILLE NC 28785 CITY-ST-ZIP TITLE BUP REVELIA NAME 52 PASCO LOOP STREET ADDRESS TIRE NAME. . .. STREET ADDRESS CITY ST-ZIP 445 A 12. 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 10 or Block 11 if changed, or on an attagrament with an address, with all other like empowered.

FILED

6-05