2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 437052

Entity Name: BILL BENHART, INC.

REVELIA, JASON

52 PASCO LOOP

City-St-Zip: WAYNESVILLE, NC 28785

Name:

Address:

FILED Jan 05, 2009 Secretary of State

	e. bill bli	11 17 (1 CT , 11 CC .		
Current Principal Place of Business:			New Principal Place of Business:	
	ATHAN CREE VILLE, NC 287			
Current Mailing Address:			New Mailing Address:	
	ATHAN CREE VILLE, NC 287			
FEI Number	: 59-1492346	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:
LECOMPT 4113 ESTI TAMPA, F		6		
	e named entity e of Florida.	submits this statement for the p	purpose of changing its registere	ed office or registered agent, or both,
SIGNATUI	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
Election Ca	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	VS (BENHART, MA 135 SOUTHER WAYNESVILLE	N WAY	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	PT (BENHART, RO 149 PINCREST WAYNESVILLE	LANE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	AS (LANCE, SUSAI 370 N. MAIN S WAYNESVILLE	Γ	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	AST (BENHART, ME 149 PINECRES WAYNESVILLE	ST LANE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	AV () Delete	Title:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Name:

Address:

City-St-Zip:

SIGNATURE: RONALD F BENHART PRES 01/05/2009