
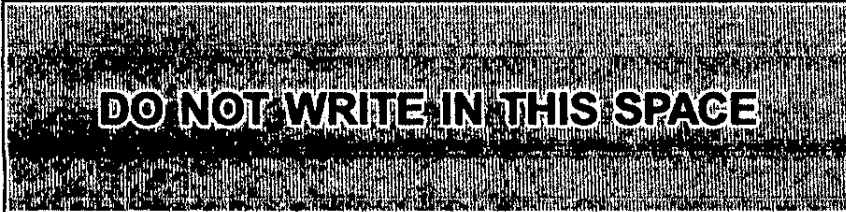


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2007 08:00 A
Secretary of State

DOCUMENT # F51970 1. Entity Name BENTLEY RESOURCES, INC.	
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Principal Place of Business 2803 62ND AVE EAST BRADENTON, FL 34203 US	Mailing Address 2803 62ND AVE EAST BRADENTON, FL 34203 US
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04052007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2130993	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SCHULER, ROBERT D
2803 62ND AVE EAST
BRADENTON, FL 34203**

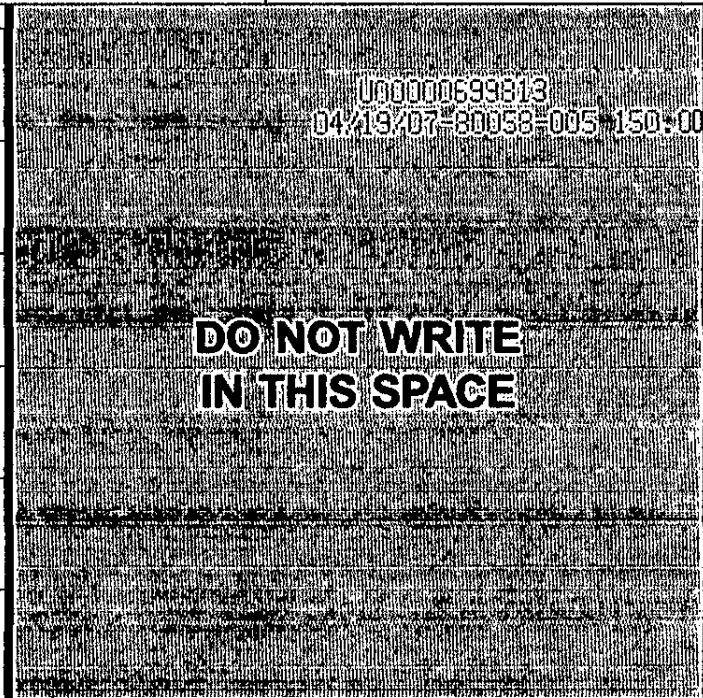


8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$350.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE VTS	SCHULER, EILEEN 2803 62ND AVE EAST BRADENTON, FL 34203
TITLE P	SCHULER, ROBERT D 2803 62ND AVENUE EAST BRADENTON, FL 34203
TITLE NAME	STREET ADDRESS
TITLE NAME	STREET ADDRESS
TITLE NAME	STREET ADDRESS
TITLE NAME	STREET ADDRESS
TITLE NAME	STREET ADDRESS



12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attachment with an address, with all other like empowered.

SIGNATURE: Eileen Schuler **EILEEN SCHULER** 4/04/07 941-739-8667

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #