2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07454

FILED Feb 28, 2005 Secretary of State

Entity Name: THE VILLAGE AT BENTLEY PARK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:					New Principal Place of Business:			
701 ENTER	' ASSN. MG RPRISE RD ARBOR, FL	E#302	US					
Current Mailing Address:					New Mailing Address:			
701 ENTER	′ ASSN. MG RPRISE RD ARBOR, FL	E#302	US					
FEI Number:	59-2777343	FEI Nu	mber Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Status Desired ()	
Name and	Address of	f Current	Registered Agent:		Name and	Address o	of New Registered Agent:	
CIANFRONE, JOSEPH R. 1968 BAYSHORE BLVD. 824 E FLETCHER AVE DUNEDIN, FL 34698 US					CIANFRONE, JOSEPH R. 1964 BAYSHORE BLVD. DUNEDIN, FL 34698 US			
The above in the State		y submits	this statement for the pu	ırpose of	f changing it	s registere	d office or registered agent, or both,	
SIGNATURE:					02/28/2005			
	Electr	onic Signa	ature of Registered Ager	nt			Date	
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD FIORE, JAMI 2599 BENTL PALM HARB	EY DRIVE			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D BARRESE, V 2390 BENTL PALM HARB	EY DR	84		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	TD HADDIX, THE 2571 BENTL PALM HARB	EY DR	84		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D RASMUSSEN 2443 BENTL PALM HARB	EY	84		Title: Name: Address: City-St-Zip:	SD RASMUSSE 2443 BENTI PALM HARE		
Title: Name: Address: City-St-Zip:	VPD RENNA, DEN 2425 BAYWO DUNEDIN, FI	OOD DR E			Title: Name: Address: City-St-Zip:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES FIORE P 02/28/2005