


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # S19736
1. Entity Name
BENDER & ASSOCIATES ARCHITECTS, P.A.



Principal Place of Business
410 ANGELA ST
KEY WEST, FL 33040 US

Mailing Address
410 ANGELA ST
KEY WEST, FL 33040 US

DO NOT WRITE IN THIS SPACE



01122006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0233075

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BENDER, BERT L.
410 ANGELA ST
KEY WEST, FL 33040

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

UN0000387038
01/19/06-80022-018 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BENDER, BERT L
STREET ADDRESS	410 ANGELA ST
CITY-ST-ZIP	KEY WEST, FL
TITLE	VP
NAME	BENDER, NANCY G
STREET ADDRESS	619 ELIZABETH STREET
CITY-ST-ZIP	KEY WEST, FL
TITLE	ST
NAME	READ, E N
STREET ADDRESS	1509 PATRICIA STREET
CITY-ST-ZIP	KEY WEST, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: BERT BENDER BERT BENDER 1.12.06 296.1349
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT Date Daytime Phone #