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Jan 15 1997 8:00am

Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S27627 (6) BENTLEY ARCHITECTS AND ENGINEERS, INC.



Principal Place of Business: 217 N. WESTMANTE DR. 2012 ALTAMONTE SPRINGS FL 32714 US

Mailing Address: 217 N. WESTMANTE DR. 2012 ALTAMONTE SPRINGS FL 32714-3338 US

3. Date Incorporated or Qualified: 01/21/1991
3a. Date of Last Report: 05/01/1996
4. FEI Number: 59-3045321
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 665 W. Warren Ave 22 Suite, Apt. #, etc. 23 Longwood, Florida 24 32750 25 Country 26 27 City & State 28 29 Zip 30 Country

9. Name and Address of Current Registered Agent: BENTLEY, WILLIAM C 217 NORTH WESTMONTE AVENUE SUITE 2012 ALTAMONTE SPRINGS FL 32714

10. Name and Address of New Registered Agent: 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent in both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the implications of, Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] DATE: [Date]

Table with 6 rows and 2 columns for Officers and Directors. Includes fields for Title, Name, Street Address, City-ST-ZIP, and a DELETED checkbox.

Table with 6 rows and 2 columns for Additions/Changes to Officers and Directors. Includes fields for Title, Name, Street Address, City-ST-ZIP, and checkboxes for Change and Addition.

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYTIME PHONE #

CR2E034 (9/96)