

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AB)

FILED

Feb 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P03000031298 1. Entity Name BENTLEY & BENTLEY HOLDINGS, INC.					
Principal Place of Business 3160 INVERNESS WESTON FL 33332				Mailing Address 3160 INVERNESS WESTON FL 33332	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number Applied For Not Applicable	
6. Name and Address of Current Registered Agent				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
ROSENBERG, ANDREW G 8751 W BROWARD BLVD STE 106 PLANTATION FL 33324				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 <i>Beth Bentley</i>		Secretary <i>Secretary</i>		DATE <i>2/16/04</i>	
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when substituting)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	DP ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	BENTLEY, LAURA		NAME		
STREET ADDRESS	3160 INVERNESS		STREET ADDRESS		
CITY-ST-ZIP	WESTON FL 33332		CITY-ST-ZIP		
TITLE	DV ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	BENTLEY, IAN		NAME		
STREET ADDRESS	9536 CAVENDISH DRIVE		STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33626		CITY-ST-ZIP		
TITLE	DS ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	BENTLEY, BETH		NAME		
STREET ADDRESS	9536 CAVENDISH DRIVE		STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33626		CITY-ST-ZIP		
TITLE	DT ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	BENTLEY, HARRISON		NAME		
STREET ADDRESS	3160 INVERNESS		STREET ADDRESS		
CITY-ST-ZIP	WESTON FL 33332		CITY-ST-ZIP		
TITLE	☐ Delete		TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	☐ Delete		TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <i>Beth Bentley</i>			Date <i>2/16/04</i> Daytime Phone # <i>813-503-1876</i>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					