

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L16775

**FILED**  
**Feb 25, 2015**  
**Secretary of State**  
**CC9115891327**

**Entity Name:** BENT TREE PROPERTIES, INC.

**Current Principal Place of Business:**

2234 RIVER RD  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

2234 RIVER RD  
JACKSONVILLE, FL 32207

**FEI Number:** 59-3000205

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BOYER, LORI N  
2234 RIVER ROAD  
JACKSONVILLE, FL 32207 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DP  
Name BOYER, LORI N  
Address 2234 RIVER ROAD  
City-State-Zip: JACKSONVILLE FL

Title AS  
Name GAYE ELISON  
Address 2519 IROQUOIS AVENUE  
City-State-Zip: JACKSONVILLE FL 32210

Title AT  
Name TERRELL A NEMEYER  
Address 22 THIRD AVENUE  
City-State-Zip: BRANDFORD CT

Title VP  
Name NEMEYER, RONALD J  
Address 103 WEST POPLAR AVENUE  
City-State-Zip: CARRBORO NC 27510

*I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LORI N. BOYER

**PRESIDENT**

**02/25/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date