

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002859

Entity Name: BENTLEY SYSTEMS DELAWARE, INC.**Current Principal Place of Business:**685 STOCKTON DRIVE
EXTON, PA 19341**Current Mailing Address:**685 STOCKTON DRIVE
ATTN: TAX DEPT.
EXTON, PA 19341**FEI Number:** 95-3936623**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 VP
Name BENTLEY, KEITH A
Address 685 STOCKTON DRIVE
City-State-Zip: EXTON PA 19341

Title PRES
Name BENTLEY, GREGORY S
Address 685 STOCKTON DRIVE
City-State-Zip: EXTON PA 19341

Title VP
Name BENTLEY, BARRY J
Address 685 STOCKTON DRIVE
City-State-Zip: EXTON PA 19341

Title DIR
Name GRISWOLD, KIRK
Address SUITE 2903, 950, WEST VALLEY ROAD
City-State-Zip: WAYNE PA 19087

Title SEC
Name SHAMAN, DAVID
Address 685 STOCKTON DRIVE
City-State-Zip: EXTON PA 19341

Title TREA
Name HOLLISTER, DAVID
Address 685 STOCKTON DRIVE
City-State-Zip: EXTON PA 19341

Title VP
Name BENTLEY, RAY
Address 685 STOCKTON DRIVE
City-State-Zip: EXTON PA 19341

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: DAVID HOLLISTER

CFO

04/30/2019

Electronic Signature of Signing Officer/Director Detail_____
Date