## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** May 20 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3) BENTON AND COMPANY, INC. Principal Place of Business Mailing Address 2837 21ST AVENUE NORTH 2837 21ST AVENUE NORTH ST. PETERSBURG FL 33713 ST. PETERSBURG FL 33713 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/17/1935 2. Principal Place of Business 2a. Mailing Address Applied For 21 59-0161750 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional П 5. Certificate of Status Desired 22 Fee Required City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 25 30 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name 2837 21ST AVENUE NORTH Street Address (P.O. Box Number is Not Acceptable) 82 ST. PETERSBURG FL 33713 83 84 City 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 agent, or 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 obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or presed non-elof registered agent and tale if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITLE PATERI, LIZ NAME 1.2 NAME 2837 21ST AVE. N. STREET ADDRESS 1.3 STREET ADDRESS **\$T. PETERSBURG FL** CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 2.1 TITLE EVANS, R. W. 2.2 NAME NAME 2837 21ST AVE. N. STREET ADDRESS 2.3 STREET ADDRESS **ST. PETERSBURG FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIF 3.4. CHY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 THILE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-\$T-ZIP 5.4 CITY-S1-7IP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 14. I 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 trusted 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 atjuding only ith an address

2-31-08

**FILED**