2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 19, 2007 8:00 am Secretary of State

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DOCUMENT # 756858 1. Entity Name LAKE BENTLEY SHORES, INC.											of Sta	
Principal Place 1920 EDGEW LAKELAND, F	VOOD DR.		1920	g Address D EDGEWOOD DR. ELAND, FL 33803	US					.		174 6 1 1821
2. Principal Place of Business - No P.O. Box #			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				07032007	Chg-NP	CR2	E037 (12/06)		
City & State			City & State					4. FEI Numbe 59-211				plied For Applicable
Zip	Coun	try	Zi _l	p	Cou	untry	•	5. Certificate	of Status Desire	ed 🗌	\$8.75 Add Fee Required	litional
	6. Name and Add	ress of Current	Register	ed Agent		T		7. Name and	Address of Ne	w Registen	ed Agent	
	11.514					Name						
MILLER, MARK 1 LAKE MORTON DRIVE LAKELAND, FL 33801				Street Add			.ddress (ss (P.O. Box Number is Not Acceptable)				
						City					■■ Zip Code	
						City				F		9
	named entity submits tions of registered ager		r the purp	oose of changing its	register	ed office a	r register	ed agent, or bot	h, in the State o	of Florida. 1	am familiar with,	and accept
OLONIA TUDE												
SIGNATURE .	Signature, typed or printed na	me of registered agent	and title if ap	plicable. (NOT	E: Registere	ed Agent signati	ure required	when reinstating)		OA [*]	ſĘ	
	Signature, typed or printed na Filling Fee is \$6 ue by Septembe	1.25	and title if ap	9. Election Car Trust Fund (mpaign F	Financing	ure required	\$5.00 May B Added to Fees	e 1	Make ch	eck payable to partment of Si	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, 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:	Muke Melito	MIKE MEL	ito	
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING	Date	Daytime Phone #	