

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90240 027 ***150.00

DOCUMENT # H50361

1. Entity Name
BENSON'S LOCK SERVICE, INC.



Principal Place of Business
1633 14TH AVENUE
VERO BEACH, FL 32960

Mailing Address
P. O. BOX 2847
VERO BEACH, FL 32961

94072124



04262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2553247

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILDER, SHERMAN M MR
166 9TH COURT
VERO BEACH, FL 32962

**DO NOT WRITE
IN THIS SPACE**

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 Sherman Wilder SHERMAN M. WILDER 4-27-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	STEVE LANDIN
STREET ADDRESS	166 9TH COURT
CITY-ST-ZIP	VERO BEACH, FL 32962
TITLE	VP
NAME	BLOOMER, GEORGE
STREET ADDRESS	1555 14TH AVE, APT. 101
CITY-ST-ZIP	VERO BEACH, FL 32960
TITLE	VP
NAME	WILDER, SHERMAN M
STREET ADDRESS	166 9TH COURT
CITY-ST-ZIP	VERO BEACH, FL 32962
TITLE	TREA
NAME	WILDER, SHERMAN M
STREET ADDRESS	166 9TH COURT
CITY-ST-ZIP	VERO BEACH, FL 32962
TITLE	P
NAME	LANDIN, STEVE
STREET ADDRESS	166 9TH COURT
CITY-ST-ZIP	VERO BEACH, FL 32962
TITLE	SEC
NAME	WILDER, SHERMAN M
STREET ADDRESS	166 9TH COURT
CITY-ST-ZIP	VERO BEACH, FL 32962

**DO NOT WRITE
IN THIS SPACE**

12. 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 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: Sherman Wilder SHERMAN M. WILDER 4/26/04 772-567-5968
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #