2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2007
Secretary of State

DOCUMENT# J20868

Entity Name: BENTON MACHINE WORKS, INC.

Current Principal Place of Business:

740 CARLTON ST.
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

740 CARLTON ST.
JACKSONVILLE, FL 32208

New Mailing Address:

FEI Number: 59-2696290 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

STALLARD, JAMES E JR
2653 SCOTT MILL LN
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: AVP ( ) Delete
Name: BENTON, CHARLES W.,
Address: 8925 SAN RAE ROAD
City-St-Zip: JACKSONVILLE, FL 32257

Title: AVP ( ) Delete
Name: STALLARD, JAMES E.,, JR.
Address: 2653 SCOTT MILL LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: VPS ( ) Delete
Name: STALLARD, DONNA B.,
Address: 2653 SCOTT MILL LN
City-St-Zip: JACKSONVILLE, FL 32223

Title: PT ( ) Delete
Name: LEE, CONNIE B.,
Address: 9137 TREVI CIRCLE W.
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CONNIE B. LEE PT 03/21/2007

Electronic Signature of Signing Officer or Director — Date