

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J66866

FILED
Apr 09, 2009
Secretary of State

Entity Name: BENTZ AIR CONDITIONING & APPLIANCES, INC.

Current Principal Place of Business:

% STANLEY PAT BENTZ
15 OBSERVATION ST
LAKE PLACID, FL 33852

New Principal Place of Business:

% STANLEY PAT BENTZ
15 OBSERVATION ST
LAKE PLACID, FL 33852 US

Current Mailing Address:

% STANLEY PAT BENTZ
15 OBSERVATION ST
LAKE PLACID, FL 33852

New Mailing Address:

% STANLEY PAT BENTZ
15 OBSERVATION ST
LAKE PLACID, FL 33852 US

FEI Number: 59-2637617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENTZ, STANLEY PAT
15 OBSERVATION ST
LAKE PLACID, FL 33852 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: DP () Delete
Name: BENTZ, STANLEY PAT
Address: 2843 MEADOWWOOD LANE
City-St-Zip: SEBRING, FL 33875

Title: DST () Delete
Name: BENTZ, CAROL J.
Address: 2843 MEADOWWOOD LANE
City-St-Zip: SEBRING, FL 33875

Title: DVP () Delete
Name: BENTZ, CHARLES J.
Address: 143 ALDERMAN DRIVE
City-St-Zip: LAKE PLACID, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BENTZ, STANLEY PAT
Address: 2843 MEADOWWOOD LANE
City-St-Zip: SEBRING, FL 33875 US

Title: DST (X) Change () Addition
Name: BENTZ, CAROL J.
Address: 2843 MEADOWWOOD LANE
City-St-Zip: SEBRING, FL 33875 US

Title: DVP (X) Change () Addition
Name: BENTZ, CHARLES J.
Address: 143 ALDERMAN DRIVE
City-St-Zip: LAKE PLACID, FL 33852 US

I hereby certify that the information supplied with this filing does not qualify 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: STANLEY PAT BENTZ

PRES

04/09/2009

Electronic Signature of Signing Officer or Director

_____ Date