

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J66866

FILED  
Mar 14, 2012  
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 US

**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 US

**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

**OFFICERS AND DIRECTORS:**

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: STANLEY PAT BENTZ

PRES

03/14/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date