

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00809

FILED
Apr 18, 2002 8:00 AM
Secretary of State

Entity Name: THE BENNETT AGENCY, INC.

Current Principal Place of Business:

635 VIZNAR AVE
CORAL GABLES, FL 33143

New Principal Place of Business:

Current Mailing Address:

635 VIZNAR AVE.
CORAL GABLES, FL 331436363 US

New Mailing Address:

FEI Number: 65-0133464

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAPIR, M. RICHARD
222 LAKEVIEW AVE.
STE 1400
W PALM BEACH, FL 33401

Name and Address of New Registered Agent:

SAPIR, M. RICHARD
777 SOUTH FLAGLER DRIVE
STE 900 WEST
W PALM BEACH, FL 33401

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:

04/18/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BENNETT, PATRICIA S.,
Address: 635 VIZNAR AVE
City-St-Zip: CORAL GABLES, FL

Title: STD (X) Delete
Name: BENNETT, WILLIAM D.,
Address: 635 VIZNAR AVE
City-St-Zip: CORAL GABLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BENNETT, WILLIAM D
Address: 635 VIZNAR AVE
City-St-Zip: CORAL GABLES, FL 33143 US

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 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 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: WILLIAM D. BENNETT

PD

04/18/2002

Electronic Signature of Signing Officer or Director

Date