


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # L01689


1. Entity Name
BENTZEL MECHANICAL, INC.



Principal Place of Business
**2880 SCHERER DR SUITE 860
 ST PETERSBURG, FL 33716**

Mailing Address
**2880 SCHERER DR SUITE 860
 ST PETERSBURG, FL 33716**

DO NOT WRITE IN THIS SPACE



04042008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2957793	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BENTZEL, THOMAS E.
 1011 DUNCAN AVENUE SOUTH
 CLEARWATER, FL 33756**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00**

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

U00000894742
 04/24/08-80039-006 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC BENTZEL, THOMAS E. 1011 DUNCAN AVENUE SOUTH CLEARWATER, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT PEREGOY, DOUGLAS L. 2839 POPLAR STREET SARASOTA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BENTZEL, ROBERT T. 891 HARBOR HILL DR SAFETY HARBOR, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BARRETT, JANET 513 OAKWOOD BLVD OLDSMAR, FL 34677
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **4/4/08 727572767**

SIGNATURE (TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) _____ Date _____ Daytime Phone # _____