

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 16, 2003 8:00 am**  
**Secretary of State**

04-16-2003 90040 015 \*\*\*\*\*50.00

**DOCUMENT #** L02000033188

**1. Entity Name**

BENTWATER TEN, L.L.C.



**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**

**3020 Hartley Road**

Suite, Apt. #, etc.

**Suite 100**

City & State

**Jacksonville, FL**

Zip

**32257**

Country

**Duval**

**3. Mailing Address**

**3020 Hartley Rd**

Suite, Apt. #, etc.

**Suite 100**

City & State

**Jacksonville, FL**

Zip

**32257**

Country

**Duval**

DO NOT WRITE IN THIS SPACE

**4. FEI Number**

**54-2086097**

Applied For

Not Applicable

**5. Certificate of Status Desired** ☐

**\$5.00 Additional  
Fee Required**

**7. Name and Address of Current Registered Agent**

Name

**Clifford B. Newton**

Street Address (P.O. Box Number is Not Acceptable)

**10192 San Jose Boulevard**

City

**Jacksonville,**

**FL**

Zip Code  
**32257**

**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**

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FEE IS \$50.00**

**Make Check Payable to Florida Department of State**

**DUE BY MAY 1**

**9. MANAGING MEMBERS/MANAGERS**

**TITLE MGRP**  
**NAME The Hutson Companies, LLC**  
**STREET ADDRESS 3020 Hartley Road,, Suite 100**  
**CITY-ST-ZIP Jacksonville, FL 32257**

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IN THIS SPACE**

**11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.**

**SIGNATURE:**

**Donald P. Hinson, Member**

**4/11/03**

**904/262-7718**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083B (12/02)