2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# N02347

Entity Name: BENTLEY HARBOR HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2020 E EDGEWOOD DRIVE
OFFICE
LAKELAND, FL 33803 US

New Principal Place of Business:

Current Mailing Address:

2020 E EDGEWOOD DRIVE
OFFICE
LAKELAND, FL 33803 US

New Mailing Address:

FEI Number: 59-2553725 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLENN, LARRY E.
2020 E. EDGEWOOD DRIVE
LAKELAND, FL 33803 US

Name and Address of New Registered Agent:

GLENN, LARRY E
2020 E. EDGEWOOD DRIVE
LAKELAND, FL 33803 US

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: LARRY E. GLENN 02/23/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GLENN, LARRY E
Address: 2020 E EDGEWOOD DR
City-St-Zip: LAKELAND, FL 33803

Title: SD ( ) Delete
Name: SCALES, JULIE Y
Address: 2020 EDGEWOOD DR.,#51
City-St-Zip: LAKELAND, FL

Title: TD ( ) Delete
Name: WAGNER, JOHN,
Address: 2020 EDGEWOOD DR.,#52
City-St-Zip: LAKELAND, FL

Title: D ( ) Delete
Name: FRANCOIS, JASMIN
Address: 2020 E.EDGEWOOD DR.#60
City-St-Zip: LAKELAND, FL 33803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY E. GLENN P 02/23/2009
Electronic Signature of Signing Officer or Director Date