

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000006341

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: T H BENTZ CONSTRUCTION INC

## Current Principal Place of Business:

34 RUE D'ETRETAT  
DESTIN, FL 32541 US

## New Principal Place of Business:

178 LOLA CIRCLE  
DESTIN, FL 32541 US

## Current Mailing Address:

34 RUE D'ETRETAT  
DESTIN, FL 32541 US

## New Mailing Address:

178 LOLA CIRCLE  
DESTIN, FL 32541 US

FEI Number: 20-8273805

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FANELLA, NICHOLAS R  
434 TANGLEWOOD DRIVE  
FORT WALTON BEACH, FL 32547 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: BENTZ, THOMAS H  
Address: 34 RUE D'ETRETAT  
City-St-Zip: DESTIN, FL 32541 US

Title: VP (X) Delete  
Name: BENTZ, PHILLIP  
Address: 34 RUE D'ETRETAT  
City-St-Zip: DESTIN, FL 32541 US

Title: VP (X) Delete  
Name: DYKMAN, MATTHEW  
Address: 34 RUE D'ETRETAT  
City-St-Zip: DESTIN, FL 32541 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: BENTZ, THOMAS H  
Address: 178 LOLA CIRCLE  
City-St-Zip: DESTIN, FL 32541 US

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

SIGNATURE: THOMAS H. BENTZ

PSD

04/08/2009

Electronic Signature of Signing Officer or Director

Date