

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 13, 2006 8:00 am**  
**Secretary of State**

03-13-2006 90083 008 \*\*\*150.00

**DOCUMENT # P96000018990**

1. Entity Name  
**BESTERFIELD CORPORATION**



Principal Place of Business  
**% 215 NORTH EOLA DRIVE  
ORLANDO, FL 32801**

Mailing Address  
**% 215 NORTH EOLA DRIVE  
ORLANDO, FL 32801**

**50002219**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01182006

Chg-P

CR2E034 (11/05)

City & State

City & State

4. FEI Number  
**59-3446526**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

## 6. Name and Address of Current Registered Agent

**YERGLER, JON C  
215 NORTH EOLA DRIVE  
ORLANDO, FL 32801**

## 7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DPST  
BARNETT, BESTON  
215 NORTH EOLA DRIVE  
ORLANDO, FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
BARNETT, SIDNEY  
215 NORTH EOLA DRIVE  
ORLANDO, FL 32801** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**C. SIDNEY BARNETT, DIRECTOR**

**LOWNDES  
DROSDICK  
DOSTER  
KANTOR &  
REED, P.A.**

Attorneys at Law

**ATTACHMENT**

**215 NORTH EOLA DRIVE  
ORLANDO, FLORIDA 32801**

**50002219  
# P96000018996  
450 SOUTH ORANGE AVENUE, SUITE 800  
ORLANDO, FLORIDA 32801**

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www.lowndes-law.com

**GAIL S. ANDRÉ**  
PARALEGAL, CORPORATE DEPARTMENT  
North Eola Drive Office  
Direct Dial: (407) 418-6203  
E-mail: gail.andre@lowndes-law.com

March 8, 2006

**CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**  
7005 1820 0003 0102 1527

Division of Corporations  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

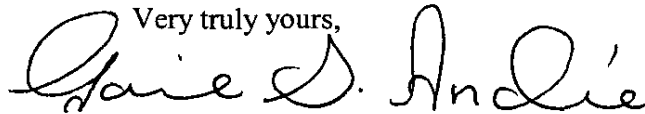
**Re: 2006 For Profit Corporation Annual Report  
Besterfield Corporation**

Dear Madam or Sir:

Enclosed herewith for filing please find an executed 2006 For Profit Corporation Annual Report for Besterfield Corporation, together with our firm's check number 181575 in the amount of \$150.00 payable to the Florida Department of State representing the filing fee:

Thank you for your assistance in this matter.

Very truly yours,



Gail S. André  
Corporate Paralegal to  
Matthew R. O'Kane

GSA/cj  
Enclosures  
0005699/059788/521598/20  
c: Matthew R. O'Kane, Esquire