

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000043727

FILED
Jan 23, 2009
Secretary of State

Entity Name: BENNETT & BENNETT SERVICE INC.

Current Principal Place of Business:

315 HERBERT STREET
PORT ORANGE, FL 32129

New Principal Place of Business:

315 HERBERT STREET
PORT ORANGE, FL 32129 US

Current Mailing Address:

315 HERBERT STREET
PORT ORANGE, FL 32129

New Mailing Address:

315 HERBERT STREET
PORT ORANGE, FL 32129 US

FEI Number: 59-3388065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENNETT, LAWRENCE E
1768 SAND PINE TRAIL
DELAND, FL 32724 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: PD () Delete
Name: BENNETT, LARISA D
Address: 392 S RIDGEWOOD AVE
City-St-Zip: ORMOND BEACH, FL

Title: VPD () Delete
Name: BENNETT, LAWRENCE E P.E.
Address: 1768 SAND PINE TRAIL
City-St-Zip: DELAND, FL 32724

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GAWEL, ROBIN L
Address: 1139 HERBERT STREET
City-St-Zip: PORT ORANGE, FL 32129 US

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

Title: SEC () Change (X) Addition
Name: GEBO, PETREA L
Address: 478 FALLING LEAF
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

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: ROBIN L. GAWEL

PD

01/23/2009

Electronic Signature of Signing Officer or Director

Date