## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P97000059963 1. Entity Name BENTLEY'S TRANSPORTATION, INC. 05-15-2000 90211 004 \*\*\*150.00 Principal Place of Business Mailing Address 8265 HOGAN RD 8265 HOGAN RD JACKSONVILLE FL 32216 JACKSONVILLE FL 32216-3174 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3467015 Not Applicable Zip Country Ζiρ Country \$8.75 Additional 5. Certificate of Status Desired-Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MOONLY, STEPHEN K Street Address (P.O. Box Number is Not Acceptable) 1301 RIVERPLACE BLVD, SUITE 1818 JACKSONVILLE FL 32207 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE CR2E034 (9/99) ☐ Change ☐ Addition BENTLEY, JOHN NAME NAME 8265 HOGAN RD STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32216 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME

## **FILED** May 15, 2000 8:00 am Secretary of State