

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**Apr 30, 1999 8:00 am**  
**Secretary of State**

04-30-1999 90186 010 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # P98000100107

1. Corporation Name  
**RICHARD L. BENTLEY, INC.**



Principal Place of Business: 8694 CROWN DRIVE BOYNTON BEACH FL 33436  
 Mailing Address: 8694 CROWN DRIVE BOYNTON BEACH FL 33436

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**12/01/1998**

2. Principal Place of Business: 21 **200 Hypoluxo Road**  
 Suite, Apt. #, etc. **204**  
 22 **204**

2a. Mailing Address: 26 **200 Hypoluxo Road**  
 Suite, Apt. #, etc. **204**  
 27 **204**

4. FEI Number: **65-0884768**  
 Applied For:  Not Applicable

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

23 **Hypoluxo, FL**

28 **Hypoluxo FL**

6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

24 **33462** 25 **Palm Beach**

29 **33462** 30 **Palm Beach**

This corporation owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BENTLEY, RICHARD L**  
**8694 CROWN DRIVE**  
**BOYNTON BEACH FL 33436**

81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable): **200 Hypoluxo Road**  
 83 **Suite # 204**  
 84 City: **Hypoluxo** 85 Zip Code: **FL 33462**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BENTLEY, RICHARD L</b>	1.2 NAME	<b>200 Hypoluxo Road</b>
STREET ADDRESS	<b>8694 CROWN DRIVE</b>	1.3 STREET ADDRESS	<b>Hypoluxo, FL 33462</b>
CITY-ST-ZIP	<b>BOYNTON BEACH FL 33436</b>	1.4 CITY-ST-ZIP	<b>Hypoluxo, FL 33462</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard L Bentley*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-99 561-588-9776  
 Date Daytime Phone #

CR2E034 (1/1/98)