

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000107880

Entity Name: ROBERT S. BENNETT, INC.

FILED
Jun 09, 2004
Secretary of State

Current Principal Place of Business:

6122 BENJAMIN ROAD
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

6122 BENJAMIN ROAD
TAMPA, FL 33634

New Mailing Address:

FEI Number: 59-3548500

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENNETT, ROBERT S
1940 GRENVILLE CT
WESLEY CHAPEL, FL 33543

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: BENNETT, ROBERT S
Address: 1940 GRENVILLE CT
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: V () Delete
Name: BENNETT, CHARLES D
Address: 1180 GULF BLVD 206
City-St-Zip: CLEARWATER, FL 33767

Title: S () Delete
Name: ALBERTO, AMOURY
Address: 4512 W IDLEWILD AVE
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: ALBERTO, AMAURY
Address: 4512 IDLEWILD AVE.
City-St-Zip: TAMPA, FL 33614

Title: S (X) Change () Addition
Name: ALBERTO, AMAURY
Address: 4512 W IDLEWILD AVE
City-St-Zip: TAMPA, FL 33614

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT S. BENNETT

PST

06/09/2004

Electronic Signature of Signing Officer or Director

Date