

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90719 046 ***158.75

DOCUMENT # P99000067866

1. Entity Name
BENTLEY MORTGAGE GROUP, INC.



Principal Place of Business

~~13909 N. DALE MABRY~~

~~#109~~

~~TAMPA FL 33618~~

US

Mailing Address

~~49909 N. DALE MABRY~~

~~#109~~

~~TAMPA FL 33618~~

US

2. Principal Place of Business

8506 N. Mobley Rd

3. Mailing Address

SAFARI

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Odessa, FL

City & State

Odessa, FL

Zip

33556

Country

USA

Zip

33556

Country

USA

4. FEI Number

59-3591396

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BENTLEY, HERSCHEL G

17039 WINNERS CIR.

ODESSA FL 33556

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, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete

PVD
HERSCHEL, BENTLEY G
13909 N DALE MABRY #109
TAMPA FL 33618

TITLE NAME ☒ Delete

STD
BENTLEY, JENNIFER S
13909 N DALE MABRY #109
TAMPA FL 33618

TITLE NAME ☐ Delete

D
BENTLEY, H L
13909 N DALE MABRY #109
TAMPA FL 33618

TITLE NAME ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☒ Change ☐ Addition

8506 N. Mobley Rd
Odessa, FL 33556

TITLE NAME ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☒ Change ☐ Addition

8506 N. Mobley Rd
Odessa, FL 33556

TITLE NAME ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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 REQUIRED
Herschel Bentley

4/4/04

813-926-2727

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)