

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90076 036 ***150.00

DOCUMENT # P99000110454

1. Entity Name
BENNETT SEARCH & CONSULTING, COMPANY, INC.

Principal Place of Business
7068 DENNIS CIRCLE
103
NAPLES FL 34104

Mailing Address
7065 DENNIS CIR., NO. 103
NAPLES FL 34104



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
285-1 NAOMI DRIVE
NAPLES, FL 34104

3. Mailing Address
BENNETT SEARCH & CONSULTING COMPANY INC.
285-1 NAOMI DRIVE
NAPLES, FL 34104

Suite, Apt. #, etc.
BENNETT SEARCH & CONSULTING COMPANY INC.

Suite, Apt. #, etc.

City & State
285-1 NAOMI DRIVE
NAPLES, FL 34104

City & State

4. FEI Number **59-3614243**

Applied For
Not Applicable

Zip **Country**

Zip **Country**

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BENNETT, ROBERT C
7065 DENNIS CIR., NO. 103
NAPLES FL 34104

ROBERT C. BENNETT
285-1 NAOMI DRIVE
NAPLES, FL 34104

Name

Street Address (P.O. Box Number, if applicable)
ROBERT C. BENNETT
285-1 NAOMI DRIVE
NAPLES, FL 34104

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.

SIGNATURE

(NOTE: Registered Agent signature required when reinstating)

DATE

4/14/02

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	BENNETT, ROBERT C	
STREET ADDRESS	7065 DENNIS CIR., NO. 103	
CITY-ST-ZIP	NAPLES FL 34104	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	ROBERT C. BENNETT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	285-1 NAOMI DRIVE	
STREET ADDRESS	NAPLES, FL 34104	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/02 239-352-0219

Date

Daytime Phone #

CR2E034 (9/01)