FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
1995 MAR 17 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S70351 (9)

1. Corporation Name
R.L. BENTLEY ENTERPRISES, INC.

Principal Place of Business	Mailing Address
900 PINELLAS BAYWAY SUITE 211 TIERRE VERDE FL 33715	900 PINELLAS BAYWAY SUITE 211 TIERRE VERDE FL 33715

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 21
Suite, Apt. #, etc. 22
City & State 23
Zip 24 Country 25

2a. Mailing Address 26
Suite, Apt. #, etc. 27
City & State 28
Zip 29 Country 30

3. Date Incorporated or Qualified: 08/02/1991
3a. Date of Last Report: 07/14/1994
4. FEI Number: 59-3077426 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

INGLIS, JOHN S.
101 E. KENNEDY BLVD.
SUITE 2500
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name: James A. Byrne, Esquire
82 Street Address (P.O. Box Number is Not Acceptable): 540 - 4th Street North
83
84 City: St. Petersburg FL 85 Zip Code 33701

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 James A. Byrne James A. Byrne, Registered Agent DATE 3/10/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DPTS
NAME	LANDRY, ELIZABETH A.
STREET ADDRESS	900 PINELLAS BAYWAY #211
CITY-ST-ZIP	TIERRE VERDE FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Vice President	☐ Change ☒ Addition
1.2 NAME	Richard E. Hackett	
1.3 STREET ADDRESS	900 Pinellas Bayway, #211	
1.4 CITY-ST-ZIP	Tierre Verde, FL 33715	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME	500001435385	
3.3 STREET ADDRESS	-03/21/95--01115--010	
3.4 CITY-ST-ZIP	****200.00 ****200.00	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	JWP	☐ Change ☐ Addition
6.2 NAME	3-17	
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE: Elizabeth A. Landry Elizabeth A. Landry, Pres. 3/10/95 813-864-2153
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0311675 CR