# SIGNATURE: TAYLOR T. COLLINS

above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

I hereby 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

PRESIDENT

#### 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 619282

Entity Name: BENEFITS & PLANNING, INC.

# Current Principal Place of Business:

1 NORTH TUTTLE AVE SUITE 1 SARASOTA, FL 34237

# **Current Mailing Address:**

1858 RINGLING BLVD STE 300 SARASOTA, FL 34236 US

# FEI Number: 59-1969802

# Name and Address of Current Registered Agent:

LPS CORPORATE SERVICES, INC. 1858 RINGLING BLVD STE 300 SARASOTA, FL 34236 US

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

Officer/Director Detail :			
Title	DPTS	Title	DV
Name	COLLINS, TAYLOR T.	Name	TOLLERTON, JAMES B.
Address	P.O. BOX 1079	Address	BOX 1079
City-State-Zip:	SARASOTA FL 34230	City-State-Zip:	SARASOTA FL 34230

FILED Feb 08, 2019 Secretary of State 4504935777CC

Certificate of Status Desired: No

02/08/2019

Date

Date