

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000000771

**Entity Name:** A-PLUS BENEFITS, INC.**Current Principal Place of Business:**395 W 600 N  
LINDON, UT 84042**Current Mailing Address:**395 W 600 N  
LINDON, UT 84042**FEI Number:** 87-0476353**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUSINESS FILINGS INCORPORATED  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	P
Name	WRIGHT, BJ
Address	731 W 970 S
City-State-Zip:	MIDWAY UT 84049

Title	S
Name	BARTHOLOMEW, RICK
Address	3641 N 1140 W
City-State-Zip:	PLEASANT GROVE UT 84062

Title	VP
Name	BARTHOLOMEW, LARRY
Address	1163 N 160 E
City-State-Zip:	AMERICAN FORK UT 84003

Title	T
Name	BARTHOLOMEW, JOHN
Address	760 E 700 N
City-State-Zip:	AMERICAN FORK UT 84003

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

**SIGNATURE:** JOHN BARTHOLOMEW

CFO

03/28/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date