


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jan 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 291864 (7)					
1. Corporation Name BENFIELD INC					
Principal Place of Business 2340 DAVIS BLVD NAPLES FL 33942			Mailing Address 2340 DAVIS BLVD NAPLES FL 33942		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/09/1965	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1148073	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	34104	29	34104	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9. Name and Address of Current Registered Agent TEACH, CAROLYN H. 2550 70TH ST. SW NAPLES FL 33999				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	85 Zip Code
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 <i>Carolyn H. Teach</i> Pres DATE 1-16-98					
(NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BENFIELD, CLYDE R		1.2 NAME		
STREET ADDRESS	2775 70TH ST. S.W.		1.3 STREET ADDRESS		
CITY - ST - ZIP	NAPLES FL		1.4 CITY - ST - ZIP		
TITLE	VD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BENFIELD, MARK G.		2.2 NAME		
STREET ADDRESS	2960 70TH ST., S.W.		2.3 STREET ADDRESS		
CITY - ST - ZIP	NAPLES FL		2.4 CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HERMAN, R ALLEN		3.2 NAME		
STREET ADDRESS	2825 70TH ST SW		3.3 STREET ADDRESS		
CITY - ST - ZIP	NAPLES FL		3.4 CITY - ST - ZIP		
TITLE	PD	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TEACH, CAROLYN H.		4.2 NAME		
STREET ADDRESS	2550 70TH ST SW		4.3 STREET ADDRESS		
CITY - ST - ZIP	NAPLES FL		4.4 CITY - ST - ZIP		
TITLE	ST	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BENFIELD, ROGER O.		5.2 NAME		
STREET ADDRESS	1471 SAN MARCOS BLVD.		5.3 STREET ADDRESS		
CITY - ST - ZIP	NAPLES FL		5.4 CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - ST - ZIP		
14. 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 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.					



DO NOT WRITE IN THIS SPACE

CR2E034 (10/97)

SIGNATURE:

Carolyn H. Teach Pres

1-16-98 941 774-5255