2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2010
Secretary of State

DOCUMENT# F03000002204

Entity Name: FARA BENEFIT SERVICES, INC.

Current Principal Place of Business:

1625 WEST CAUSEWAY APPROACH
MANDEVILE, LA 70471

New Principal Place of Business:

Current Mailing Address:

1625 WEST CAUSEWAY APPROACH
MANDEVILE, LA 70471

New Mailing Address:

FEI Number: 72-1388354 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD
Name: RICHARD, M. TODD
Address: 1625 WEST CAUSEWAY APPROACH
City-St-Zip: MANDEVILLE, LA 70471

Title: VP
Name: MULLEN, NENA Y
Address: 1625 WEST CAUSEWAY APPROACH
City-St-Zip: MANDEVILLE, LA 70471

Title: SD
Name: TARANTINO, LAURA F
Address: 1625 WEST CAUSEWAY APPROACH
City-St-Zip: MANDEVILLE, LA 70471

Title: TD
Name: DUBUC, LOUIS R
Address: 1625 WEST CAUSEWAY APPROACH
City-St-Zip: MANDEVILLE, LA 70471

Title: VP
Name: DAVIS, CAMILLA Q
Address: 1625 WEST CAUSEWAY APPROACH
City-St-Zip: MANDEVILLE, LA 70471

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: CAMILLA Q. DAVIS VP 01/28/2010

Electronic Signature of Signing Officer or Director Date