2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2007
Secretary of State

DOCUMENT# F06000006807

Entity Name: BENEFITS USA FOUNDATION, INC.

Current Principal Place of Business:

809 GEORGIA AVE
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

809 GEORGIA AVE
LEESBURG, FL 34748

New Mailing Address:

FEI Number: 30-0074819 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LITTLEJOHN, TWYINE
809 GEORGIA AVE
LEESBURG, FL 34748 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

OFFICERS AND DIRECTORS:

Title: CP ( ) Delete
Name: RUFF, CHARLES
Address: 903 ELMWOOD AVE
City-St-Zip: COLUMBIA, SC 292012028

Title: D ( ) Delete
Name: ISAACS, LOU
Address: 8302 CURRY PLACE
City-St-Zip: ADELPHIA, MD 20783

Title: D ( ) Delete
Name: JAMES, F.C.
Address: 3700 FOREST DR
City-St-Zip: COLUMBIA, SC 29204

Title: S ( ) Delete
Name: RUFF, ELBERT A
Address: 842 PINEY GROVE RD
City-St-Zip: COLUMBIA, SC 29210

Title: T ( ) Delete
Name: ROGERS, MIKE
Address: 104 TURTLE COVE CT
City-St-Zip: LEXINGTON, SC 29072

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES A. RUFF CP 05/07/2007

Electronic Signature of Signing Officer or Director — Date