

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07422

FILED  
Jan 24, 2012  
Secretary of State

**Entity Name:** FRINGE BENEFIT COORDINATORS, INC.

**Current Principal Place of Business:**

1239 N.W. 10TH AVENUE  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 5249  
GAINESVILLE, FL 32627

**New Mailing Address:**

**FEI Number:** 59-2048348

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ZINGER, GEORGE R  
1239 N.W. 10TH AVENUE  
GAINESVILLE, FL 32601 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: CEO  
Name: ZINGER, GEORGE R  
Address: 1239 NW 10TH AVE  
City-St-Zip: GAINESVILLE, FL 32601

Title: VP  
Name: LEGE, ELIZABETH  
Address: 1239 NW 10TH AVE  
City-St-Zip: GAINESVILLE, FL 32601

Title: DIR  
Name: MCCAWLEY, DOROTHY  
Address: 1239 NW 10TH AVE  
City-St-Zip: GAINESVILLE, FL 32601

Title: SEC  
Name: ZINGER, MARY M  
Address: 7510 NW 41ST AVE  
City-St-Zip: GAINESVILLE, FL 32606

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: GEORGE R ZINGER

CEO

01/24/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date