

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002318

FILED  
Feb 21, 2012  
Secretary of State

**Entity Name:** CONSUMER BENEFITS OF AMERICA, INC.

**Current Principal Place of Business:**

3705 KIPLING ST.  
SUITE 102  
WHEAT RIDGE, CO 80033 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 281248  
DENVER, CO 80228 US

**New Mailing Address:**

**FEI Number:** 84-1079667

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLANTON, EDWIN F  
810 THOMASVILLE ROAD  
TALLAHASSEE, FL 32303 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:** DP  
**Name:** SARTEN, EDIE  
**Address:** 3190 UNION ST  
**City-St-Zip:** LAKEWOOD, CO 80215 US

**Title:** DV  
**Name:** CHRISTENSEN, KEVIN  
**Address:** 3595 MOORE CT  
**City-St-Zip:** WHEAT RIDGE, CO 80033 US

**Title:** DS  
**Name:** GAGNON, KANDI  
**Address:** 3705 KIPLING STREET #102  
**City-St-Zip:** WHEAT RIDGE, CO 80033 US

**Title:** DT  
**Name:** SARTEN, EDIE  
**Address:** 3190 UNION STREET  
**City-St-Zip:** LAKEWOOD, CO 80215

**Title:** DP  
**Name:** SARTEN, EDIE  
**Address:** 3190 UNION STREET  
**City-St-Zip:** LAKEWOOD, CO 80215 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** EDIE SARTEN

PRES

02/21/2012

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

\_\_\_\_\_  
Date