

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000005407

FILED  
Jan 07, 2004  
Secretary of State

**Entity Name:** BENEFIT AGENCY ASSOCIATES, LLC

**Current Principal Place of Business:**

5126 SAN JOSE ST.  
TAMPA, FL 33629

**New Principal Place of Business:**

2662 DICK WILSON DRIVE  
SARASOTA, FL 34240

**Current Mailing Address:**

5126 SAN JOSE ST.  
TAMPA, FL 33629

**New Mailing Address:**

2662 DICK WILSON DRIVE  
SARASOTA, FL 34240

FEI Number: 45-0468818

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RUSCHE, BARRY  
5126 SAN JOSE ST.  
TAMPA, FL 33629

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

CORBETT, BARBARA  
2662 DICK WILSON DRIVE  
SARASOTA, FL 34240

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: BARBARA CORBETT

01/07/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: P ( ) Delete  
Name: CORBETT, BARBARA M  
Address: 2662 DICK WILSON DR  
City-St-Zip: SARASOTA, FL 34240

Title: VPS (X) Delete  
Name: RUSCHE, BARRY  
Address: 5126 SAN JOSE  
City-St-Zip: TAMPA, FL 33629

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CORBETT, BARBARA  
Address: 2662 DICK WILSON DR  
City-St-Zip: SARASOTA, FL 34240

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BARBARA CORBETT

MGR

01/07/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date