

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042677

Entity Name: BENEFITS NOW, LLC

FILED
Mar 05, 2012
Secretary of State

Current Principal Place of Business:

452 OSCEOLA ST
212
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

933 CUTLER ROAD
LONGWOOD, FL 32779

Current Mailing Address:

P O BOX 916 857
LONGWOOD, FL 32791

New Mailing Address:

P O BOX 916857
LONGWOOD, FL 32791

FEI Number: 06-1712772

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COCKRELL, ASHBY U
933 CUTLER ROAD
LONGWOOD, FL 32779 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: COCKRELL, ASHBY U PRES
Address: 929 CUTLER ROAD
City-St-Zip: LONGWOOD, FL 32779

Title: MMGR
Name: COCKRELL, SHARON W SVP
Address: 929 CUTLER ROAD
City-St-Zip: LONGWOOD, FL 32779

I hereby 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: ASHBY COCKRELL

MM

03/05/2012

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