

**2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L07000056266

**FILED**  
**May 09, 2008**  
**Secretary of State****Entity Name:** CHARTER BENEFIT GROUP, LLC**Current Principal Place of Business:**1812 N. UNIVERSITY DRIVE  
PLANTATION, FL 33322**New Principal Place of Business:**2255 GLADES ROAD  
SUITE 324A  
BOCA RATON, FL 33431**Current Mailing Address:**1812 N. UNIVERSITY DRIVE  
PLANTATION, FL 33322**New Mailing Address:**2255 GLADES ROAD  
SUITE 324A  
BOCA RATON, FL 33431**FEI Number:** 20-1905462**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MORGAN, MAX  
1812 N. UNIVERSITY DRIVE  
PLANTATION, FL 33322 US**Name and Address of New Registered Agent:**MORGAN, MAX  
2255 GLADES ROAD  
SUITE 324A  
BOCA RATON, FL 33431 US

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:** MAX MORGAN

05/09/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:****Title:** MGR ( ) Delete  
**Name:** MORGAN, MAX  
**Address:** 1812 N. UNIVERSITY DRIVE  
**City-St-Zip:** PLANTATION, FL 33322**Title:** MGR ( ) Delete  
**Name:** IBRAHIM, YUSSEF  
**Address:** 1812 N. UNIVERSITY DRIVE  
**City-St-Zip:** PLANTATION, FL 33322**Title:** MGR (X) Delete  
**Name:** ECELBARGER, INA  
**Address:** 1812 N. UNIVERSITY DRIVE  
**City-St-Zip:** PLANTATION, FL 33322**ADDITIONS/CHANGES:****Title:** MGRM (X) Change ( ) Addition  
**Name:** MORGAN, MAX  
**Address:** 2255 GLADES ROAD, SUITE 324A  
**City-St-Zip:** BOCA RATON, FL 33431**Title:** MGRM (X) Change ( ) Addition  
**Name:** IBRAHIM, YUSSEF  
**Address:** 2255 GLADES ROAD, SUITE 324A  
**City-St-Zip:** BOCA RATON, FL 33431**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 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:** MAX MORGAN

MGRM

05/09/2008

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