

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000105400

FILED
Jun 24, 2009
Secretary of State

Entity Name: BENEFIT ENROLLMENT PARTNERS LLC

Current Principal Place of Business:

17330 WHISPER BREEZE WAY
LAND O LAKES, FL 34638

New Principal Place of Business:

7320 E. FLETCHER AVENUE
V400
TAMPA, FL 33637

Current Mailing Address:

17330 WHISPER BREEZE WAY
LAND O LAKES, FL 34638

New Mailing Address:

P.O. BOX 1593
LAND O LAKES, FL 34639

FEI Number: 26-3684761 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PHILYAW, MAETHENIA
Address: 17330 WHISPER BREEZE WAY
City-St-Zip: LAND O LAKES, FL 34638

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PHILYAW, MAETHENIA N
Address: 7320 E. FLETCHER AVENUE, SUITE V400
City-St-Zip: TAMPA, FL 34639

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: MAETHENIA N PHILYAW

MGRM

06/24/2009

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