

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M96000000274

Entity Name: MAXIMUM BENEFITS, L.L.C.

FILED
Jan 11, 2008
Secretary of State

Current Principal Place of Business:

315 GILMER FERRY ROAD
BALL GROUND, GA 30107

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 220
BALL GROUND, GA 301070220

New Mailing Address:

FEI Number: 58-2215871

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRON, JOHN F
7940 FRONT BEACH RD.
PANAMA CITY BEACH, FL 32407 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: MGR () Delete
Name: TUCKER, ROBERT D
Address: 405 TOWNSEND PLACE
City-St-Zip: ATLANTA, GA 30327

Title: MGRM () Delete
Name: BARRON, JOHN F
Address: 1202 BEACHCREST, 3768 HIGHWAY 30-A
City-St-Zip: SEAGROVE BEACH, FL 32459

ADDITIONS/CHANGES:

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

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: ROBERT D TUCKER

VP

01/11/2008

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