

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007204

FILED  
Jan 09, 2009  
Secretary of State

**Entity Name:** CONSUMER DIRECTED BENEFITS ASSOCIATION, INC.

**Current Principal Place of Business:**

1111 E TENNESSEE ST  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

1111 E TENNESSEE ST  
TALLAHASSEE, FL 32308

**New Mailing Address:**

**FEI Number:** 04-3611718

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MACDONALD, ROBERT M  
1111 E TENNESSEE ST  
TALLAHASSEE, FL 32308 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

**OFFICERS AND DIRECTORS:**

Title: IPP ( ) Delete  
Name: TURNOCK, MICHAEL  
Address: 1780 S. BELLAIRE ST. #302  
City-St-Zip: DENVER, CO 80222 US

Title: PE ( ) Delete  
Name: FISHER, MICHAEL DR.  
Address: P.O. BOX 461562  
City-St-Zip: AURORA, CO 80046 US

Title: ST ( ) Delete  
Name: MACDONALD, ROBERT  
Address: 1111 E TENNESSEE ST  
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: P ( ) Delete  
Name: ROSEN, ROB  
Address: 88 SUNYSIDE BLVD. #203  
City-St-Zip: PLAINVIEW, NY 11803 US

Title: VP ( ) Delete  
Name: FRANK, JOHN  
Address: 205 W. DARES BEACH RD.  
City-St-Zip: PRINCE FREDERICK, MD 20678 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: IPP (X) Change ( ) Addition  
Name: ROSEN, ROB  
Address: 88 SUNNYSIDE BLVD. SUITE 203  
City-St-Zip: PLAINVIEW, NY 11803 US

Title: P (X) Change ( ) Addition  
Name: FISHER, MICHAEL DR.  
Address: P.O. BOX 461562  
City-St-Zip: AURORA, CO 80046 US

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

Title: VP (X) Change ( ) Addition  
Name: SMITH, CHRISTOPHER  
Address: 1501 MARKET ST. MK550  
City-St-Zip: TACOMA, WA 98402 US

Title: PE (X) Change ( ) Addition  
Name: CUNNINGHAM, JOHN  
Address: 209 SAN ANSELMO AVE.  
City-St-Zip: SAN ANSELMO, CA 94960 US

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT M. MACDONALD

S-T

01/09/2009

Electronic Signature of Signing Officer or Director

Date