

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04366

FILED
Jan 07, 2012
Secretary of State

Entity Name: FLORIDA WEST COAST EMPLOYEE BENEFITS COUNCIL, INC.

Current Principal Place of Business:

C/O ING 1715 N WEST SHORE BLVD
SUITE 300
TAMPA, FL 33601

New Principal Place of Business:

5201 WEST KENNEDY BLVD
SUITE 620
TAMPA, FL 33609

Current Mailing Address:

P.O. BOX 2176
TAMPA, FL 33601

New Mailing Address:

FEI Number: 59-2436877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DURFEE, DAVID
C/O ING FINANCIAL
1715 N WESTSHORE BLVD, STE 300
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

PAUL, HOROWITZ
5201 W KENNEDY BLVD
SUITE 620
TAMPA, FL 33609 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: PAUL HOROWITZ

01/07/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: SNYDER, MARY
Address: P. O BOX 2176
City-St-Zip: TAMPA, FL 33601

Title: PE
Name: NANCY, LORENZEN
Address: P. O BOX 2176
City-St-Zip: TAMPA, FL 33601

Title: 1VP
Name: PEARSON, DAVID
Address: P. O BOX 2176
City-St-Zip: TAMPA, FL 33601

Title: T
Name: HOROWITZ, PAUL
Address: P. O BOX 2176
City-St-Zip: TAMPA, FL 33601

Title: S
Name: WANG, BONITA
Address: P. O BOX 2176
City-St-Zip: TAMPA, FL 33601

I hereby 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 all other like empowered.

SIGNATURE: PAUL HOROWITZ

T

01/07/2012

Electronic Signature of Signing Officer or Director

Date