

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N28476

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: EMPLOYEE BENEFITS COUNCIL OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

1301 RIVERPLACE BLVD
2400
JACKSONVILLE, FL 322079071 US

New Principal Place of Business:

1660 PRUDENTIAL DRIVE
400
JACKSONVILLE, FL 32207 US

Current Mailing Address:

1301 RIVERPLACE BLVD
2400
JACKSONVILLE, FL 322079071 US

New Mailing Address:

1660 PRUDENTIAL DRIVE
400
JACKSONVILLE, FL 32207 US

FEI Number: 59-2910155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BINGLER, JUDITH
1301 RIVERPLACE BLVD STE 2400
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

HANSEN, SUZANNE P
1660 PRUDENTIAL DRIVE
STE 400
JACKSONVILLE, FL 32207 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: SUZANNE P. HANSEN

04/30/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: BINGTER, JUDITH
Address: 1301 RIVERPLACE BLVD STE 2406
City-St-Zip: JACKSONVILLE, FL 322079071

Title: GE () Delete
Name: SUNGUARD, CORBEN
Address: 1660 PRUDENTIAL DRIVE
City-St-Zip: JACKSONVILLE, FL 322078197

Title: VD () Delete
Name: HARDEN-CITISTREET, LYNN
Address: 8900 FREEDOM COMMERCE PKWY
City-St-Zip: JACKSONVILLE, FL 32256

Title: PD () Delete
Name: WILLIAMS, RAY
Address: 484 JACKSONVILLE DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: SANCHEZ-SALAZAR, BARBARA
Address: 5800 BENCH BLVD STE 203
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: HANSEN, SUZANNE P
Address: 1660 PRUDENTIAL DR, STE 400
City-St-Zip: JACKSONVILLE, FL 32207

Title: S (X) Change () Addition
Name: HANSEN, SUZANNE P
Address: 1660 PRUDENTIAL DRIVE
City-St-Zip: JACKSONVILLE, FL 32207

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

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

Title: D (X) Change () Addition
Name: SANCHEZ-SALAZAR, BARBARA
Address: 5800 BENCH BLVD STE 203
City-St-Zip: JACKSONVILLE, FL 32207

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SUZANNE P. HANSEN

T

04/30/2002

Electronic Signature of Signing Officer or Director

Date