2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2007
Secretary of State

DOCUMENT# N40560

Entity Name: BENEFITS FOR CORPORATE AMERICA, INC.

Current Principal Place of Business:

3920 VIA DEL REY
#4
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

Current Mailing Address:

3920 VIA DEL REY
#4
BONITA SPRINGS, FL 34134 US

New Mailing Address:

FEI Number: 65-0298754 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEAVERS, CHERYL L
3920 VIA DELK REY
#4
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

DEAVERS, CHERYL L
3920 VIA DEL REY
#4
BONITA SPRINGS, FL 34134 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: _____ 04/13/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: DEAVERS, GIL,
Address: 3920 BIA DEL REY, #4
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DVS ( ) Delete
Name: DEAVERS, DOUG,
Address: 3920 VIA DEL REY, #4
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D ( ) Delete
Name: DEAVERS JANE A.,
Address: 3920 VIA DEL REY, #4
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVS (X) Change ( ) Addition
Name: DEAVERS, JANE,
Address: 3920 VIA DEL REY, #4
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D (X) Change ( ) Addition
Name: DEAVERS, DOUGLAS,
Address: 3920 VIA DEL REY
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D (X) Change ( ) Addition
Name: DEAVERS, CHERYL,
Address: 3920 VIA DEL REY, #4
City-St-Zip: BONITA SPRINGS, FL 34134

I hereby certify that the information supplied with this filing does not qualify for the 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: JANE DEAVERS DPVS 04/13/2007
Electronic Signature of Signing Officer or Director — Date