

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 06, 2003 8:00 am**  
**Secretary of State**

03-06-2003 90110 027 \*\*\*150.00

**DOCUMENT # P00000021512**

1. Entity Name  
**EROTICA READERS ASSOCIATION, INC.**



Principal Place of Business  
**4000 DANESBOROUGH PL.  
TALLAHASSEE FL 32303**

Mailing Address  
**4000 DANESBOROUGH PL.  
TALLAHASSEE FL 32303**

2. Principal Place of Business

**240 Rozena Loop**

3. Mailing Address

**240 Rozena Loop**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Havana FL**

City & State

**Havana FL**

4. FEI Number **59-3629223**

Applied For

Not Applicable

Zip

**32333**

Country

**USA**

Zip

**32333**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**BENEDICKS, WILLIAM JR  
4000 DANESBOROUGH PL.  
TALLAHASSEE FL 32303**

7. Name and Address of New Registered Agent

Name **William Benedicks Jr**

Street Address (P.O. Box Number is Not Acceptable)

**240 Rozena Loop**

City **Havana**

**FL**

Zip Code **32333**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **William Benedicks Jr**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**3/4/03**

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
NAME **BENEDICKS, WILLIAM JR**  
STREET ADDRESS **4000 DANESBOROUGH PLACE**  
CITY-ST-ZIP **TALLAHASSEE FL 32303**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

**to President** ☒ Change ☐ Addition  
NAME **William Benedicks Jr**  
STREET ADDRESS **240 Rozena Loop**  
CITY-ST-ZIP **Havana FL 32333**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **William Benedicks Jr**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/4/03**

Date

**850-539-6109**  
Daytime Phone #