2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2007
Secretary of State

DOCUMENT# P00000116381

Entity Name: HEALTH BENEFITS RESEARCH, INC.

Current Principal Place of Business:

11587 LOST TREE WAY
15
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

11587 LOST TREE WAY
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 01-0363530 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RYAN, JAMES H ESQ.
701 U.S. HIGHWAY 1
SUITE 402
NORTH PALM BEACH, FL 33408 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MCCARTHY, EUGENE G
Address: 11587 LOST TREE WAY
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EUGENE G MCCARTHY PRES 02/07/2007

Electronic Signature of Signing Officer or Director — Date