2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006
Secretary of State

DOCUMENT# P02000114744

Entity Name: WORKPLACE ALTERNATIVE BENEFITS, INC.

Current Principal Place of Business:

P.O. DRAWER 7323
WINTER HAVEN, FL 33883 US

New Principal Place of Business:

256 LAKE ASBURY DR
GREEN COVE SPRINGS, FL 320439547 US

Current Mailing Address:

256 LAKE ASBURY DR.
GREEN COVE SPRINGS, FL 320439547 US

New Mailing Address:

FEI Number: 22-3883199 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POBJECKY, DAVID
786 AVENUE C, SW
WINTER HAVEN, FL 33880 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: P ( ) Delete
Name: KOCHER, CARL E
Address: 786 AVE C, SW
City-St-Zip: WINTER HAVEN, FL 33880 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: KOCHER, CARL E
Address: 256 LAKE ASBURY DR
City-St-Zip: GREEN COVE SPRINGS, FL 320439547 US

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: CARL E. KOCHER PRES 01/27/2006

Electronic Signature of Signing Officer or Director Date