

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008100

FILED
Jan 16, 2009
Secretary of State

Entity Name: BENSON INSURANCE GROUP, INC.

Current Principal Place of Business:

5194 WINDSOR PARKE DRIVE
BOCA RATON, FL 33496 US

New Principal Place of Business:

Current Mailing Address:

5194 WINDSOR PARKE DRIVE
BOCA RATON, FL 33496 US

New Mailing Address:

FEI Number: 35-2193509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENSON, FRANKLIN
5194 WINDSOR PARK DRIVE
BOCA RATON, FL 33496 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: BENSON, FRANKLIN
Address: 5194 WINDSOR PARKE DRIVE
City-St-Zip: BOCA RATON, FL 33496 US

Title: VP () Delete
Name: BENSON, NANCY
Address: 5194 WINDSOR PARKE DRIVE
City-St-Zip: BOCA RATON, FL 33496 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: FRANKLIN BENSON

P

01/16/2009

Electronic Signature of Signing Officer or Director

Date