2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P06000039026

Entity Name: BENCHMARK SERVICES, INC.

Current Principal Place of Business:

509 SOUTH CHICKASAW TRAIL
#317
ORLANDO, FL 32825-785

New Principal Place of Business:

Current Mailing Address:

509 SOUTH CHICKASAW TRAIL
#317
ORLANDO, FL 32825-785

New Mailing Address:

FEI Number: 03-0584529 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, DARREN
9107 WESTPORT TERRACE
ORLANDO, FL 32817 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: SMITH, TRACI
Address: 9107 WESTPORT TERRACE
City-St-Zip: ORLANDO, FL 32817

Title: VP ( ) Delete
Name: SMITH, DARREN
Address: 9107 WESTPORT TERRACE
City-St-Zip: ORLANDO, FL 32817

Title: T ( ) Delete
Name: CONKLIN, BRAD
Address: 5935 WABASH RD.
City-St-Zip: ORLANDO, FL 32807

Title: S (X) Delete
Name: WHITAKER, JEFF
Address: 228 BRIGHTON WAY
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DARREN SMITH VP 04/30/2008

Electronic Signature of Signing Officer or Director — Date