2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000106218

City-St-Zip:

Entity Name: BENEFIT SECURITY, INC.

FILED Jan 07, 2008 Secretary of State

•		,					
Current Principal Place of Business:				New Principal Place of Business:			
	SCO TRAILS E IILL, FL 34610						
Current Mailing Address:				New Mailing Address:			
	SCO TRAILS E IILL, FL 34610						
FEI Number:	: 20-5375058	FEI Number Applied For () FEI Nu	mber Not Appl	icable ()	Certificate of Status Desired	()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
11964 PAS	, DARLENE SCO TRAILS E IILL, FL 34610						
	named entity of Florida.	submits this statement for	the purpose of	of changing i	ts registered	d office or registered agent, c	or both,
SIGNATUR	RE:						
	Electro	nic Signature of Registere	d Agent			Date	
Election Car	npaign Financin	g Trust Fund Contribution()					
OFFICERS	S AND DIREC	TORS:		ADDITION	S/CHANGE	S TO OFFICERS AND DIR	ECTORS:
Title: Name: Address: City-St-Zip:	LEBLANC, DAI	TRAILS BOULEVARD		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	LEBLANC, DAI	TRAILS BOULEVARD		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address:	() Delete		Title: Name: Address:	LEBLANC, D	() Change (X) Addition ARLENE O TRAILS BOULEVARD	

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.

City-St-Zip:

SPRING HILL, FL 34610

SIGNATURE: DARLENE M. LEBLANC PVST 01/07/2008