

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000106823

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Entity Name:** WOERTZ EMPLOYEE BENEFITS, INC.

**Current Principal Place of Business:**

1040 BAYVIEW DR., STE 326  
FORT LAUDERDALE, FL 33304

**New Principal Place of Business:**

**Current Mailing Address:**

1040 BAYVIEW DR., STE 326  
FORT LAUDERDALE, FL 33304

**New Mailing Address:**

**FEI Number:** 20-5388227

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WOERTZ, CHRISTOPHER  
1000 S.E. 4 STREET  
124  
FT LAUDERDALE, FL 33301 US

**Name and Address of New Registered Agent:**

WOERTZ, CHRISTOPHER  
4159 NE 21ST TERRACE  
LIGHTHOUSE POINT, FL 33064 US

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:**

01/11/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** WOERTZ, CHRISTOPHER  
**Address:** 4159 NE 21ST TERRACE  
**City-St-Zip:** LIGHTHOUSE POINT, FL 33064

**Title:** VP  
**Name:** TROYER, MIRACLE  
**Address:** 4159 NE 21ST TERRACE  
**City-St-Zip:** LIGHTHOUSE POINT, FL 33064

I hereby 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 all other like empowered.

**SIGNATURE:** CHRISTOPHER WOERTZ

P

01/11/2010

Electronic Signature of Signing Officer or Director

Date