

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000068991

FILED  
Jul 03, 2008  
Secretary of State

Entity Name: ALL FLORIDA BENEFITS GROUP, INC

**Current Principal Place of Business:**

1737 SOUTHCREEK DRIVE  
JACKSONVILLE, FL 32259 US

**New Principal Place of Business:**

**Current Mailing Address:**

1737 SOUTHCREEK DRIVE  
JACKSONVILLE, FL 32259 US

**New Mailing Address:**

FEI Number: 20-0346472

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEWART, MARY  
1737 SOUTHCREEK DRIVE  
JACKSONVILLE, FL 32259 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P,D ( ) Delete  
Name: STEWART, MARY  
Address: 1737 SOUTHCREEK DR  
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: VP,D ( ) Delete  
Name: JONES, ROBERT M  
Address: 12704 BURNING TREE LN W  
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: S,D ( ) Delete  
Name: DAUPHIN, MICHAEL  
Address: 4052 LAURELWOOD DR.  
City-St-Zip: JACKSONVILLE, FL 32257 US

**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:

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: MARY STEWART

PRES

07/03/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date