

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000068991

FILED
Feb 27, 2009
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

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: VP,D (X) Change () Addition
Name: BRANNEN, COURTNEY L
Address: 2522 COLLEGE ST.
City-St-Zip: JACKSONVILLE, FL 32204 US

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 K. STEWART

PRES

02/27/2009

Electronic Signature of Signing Officer or Director

Date