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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

(5)

VOLUNTARY BENEFITS INTERNATIONAL, INC.										
Principal Place o	f Business	Mailing Address				- 100110011061106100101611061	8 1845 8181) 0 4814	FAUTH DIQU	E MODEL MINIT INS	
2801 HWY. 280 SOUTH BIRMINGHAM AL 35223		2801 HWY. 280 SOUTH BIRMINGHAM AL 35223								
						3. Date Incorporated or Qualified 05/09/1990	3a. Date of 01/	Last Re 25/19		
2. Principal Place of Business		2a. Mailing Address 26				4. FEI Number Applied For 63-0984208 Not Applicable				
Suite, Apt #, etc.		Suite, Apt. #, etc. 27				5. Certificate of Status Desired Serviced Fee Required \$8.75 Additional Fee Required				
City & State		City & State			Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees				
Zip 24	Country Zip Country 25 30 30 9. Name and Address of Current Registered Agent			ry 		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No 10. Name and Address of New Registered Agent				
	g. Name and Address of Currer	iii negistereo Agent	8	1 N	ame	10. Name and Address of New K	egistered Ağ	ent		
C T COP	PORATION SYSTEM			1 0	Loot Addro	ess (P.O. Box Number is Not Acceptab	10)			
1200 SOUTH PINE ISLAND ROAD			82 Street Ad			ss (r.o. box Number is Not Acceptab	(e)			
PLANTA	TION FL 33324		8:	3						
			8	4 C	ity		FL	85 Zij	o Code	
or registered familiar with SIGNATURE	Lagent, or both, in the State of Flori , and accept the obligations of, Sec	ida. Such change was authorize Lon 607.0505, Florida Statutes.	d by the cor	porat	ion's board	ation submits this statement for the pur d of directors. I hereby accept the appo	ointment as re	ing its r gistered	egistered office agent. I am	
12.	uniture, typerfor printed had e of registered agen OFFICERS AN	ID DIRECTORS	13.	ent sign	а: ле геодичео	when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND D	RECTO	PRS IN 12	
1II.F	PD	☐ DELETE	1. 1 TiTLE	E				Change	Addition	
NAMi	FREDELLA, P. TODD		1.2 NAME		ļ					
STREET ADDRESS	2801 HYW. 280 SOUTH BIRMINGHAM AL		1.3 STRE		1					
CUTY+ST+ZIP TITLE	SD SD	☐ DELETE	1.4 CITY - 2 1 TITLE		···-	, , , , , , , , , , , , , , , , , , , ,	П	Change	☐ Addition	
NAME	WRIGHT, JOHN K.	L .2	2 2 NAMI							
STREET ADDRESS	2801 HYW. 280 SOUTH		2 3 STRE	3 STREET ADDRESS						
CITY ST ZIF	BIRMINGHAM AL	Fineria	24 City		P		F==1	<u> </u>	F) 4400.	
NAME	I WRIGHT, JOHN K.	☐ DELETE	3 1 TiTLE 3 2 NAME				L.J	Change	Addition	
STREET ADDRESS	2801 HWY 280 SOUTH		3.3 STREET ADDRESS		ORESS					
C(*Y S*+7)?	BIRMINGHAM AL		3.4 CHIY							
11°LF		☐ DELETE	4 1 TITLI	E				Change	☐ Addition	
NAME			4.2 NAMI						,	
STREET ADDRESS OUTY-ST. ZIP			4.3 STRE							
THEF		☐ DELETE	5. 1 TITU		'			Change	Addition	
NAME			5.2 NAM	£						
\$1#ELLACORESS			5 3 STHE	ET ADD	RESS					
CHY-ST-ZIP		[] DELETE	5 4 CITY 6 1 TITU		Р			Change	☐ Addition	
TITLE NAME			6 2 NAM	-			L	Ulallyc	L'1 Maganan	
STREET ADDRESS			6 3 STRE		DRESS					
CHY SI-ZIP			6.4 CITY							
certify that t eath; that I	he information indicated on this ann	iual report or supplemental anni oration or the receiver or trustee	al report is to empowered	true a	nd accurat	or the exemption stated in Section 119 te and that my signature shall have the s report as required by Chapter 607, Fl	same legal ef	ect as i	f made under	
SIGNATI	JRE: W.X.	Mariellas				1-24-96				
3.3.1A.T	SIGNATURE AND THEO	HE MINTED NAME OF TIGNING OFFICE	R OR DIRECTO	R		Date	Dayt	me Phone		