

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000007020

FILED
Apr 27, 2004
Secretary of State

Entity Name: DISTINCTIVE BENEFITS OF FLORIDA, INC.

Current Principal Place of Business:

1510 COMMERCIAL PARK DRIVE
SUITE #3
LAKELAND, FL 33801 US

New Principal Place of Business:

Current Mailing Address:

1510 COMMERCIAL PARK DRIVE
SUITE #3
LAKELAND, FL 33801 US

New Mailing Address:

FEI Number: 59-3152241 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REVER, THEODORE E III
590 E STAFFORD STREET
BARTOW, FL 33830 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: PTD () Delete
Name: REVER, THEODORE E III
Address: 590 E STAFFORD STREET
City-St-Zip: BARTOW, FL 33830

Title: VPD () Delete
Name: REVER, KATHLEEN A
Address: 619 SOMERSET LOOP
City-St-Zip: AUBURNDALE, FL 33823

Title: VP () Delete
Name: REVER, JESSICA A
Address: 590 E STAFFORD STREET
City-St-Zip: BARTOW, FL 33830

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 for the exemption stated in Section 119.07(3)(i), 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: THEODORE E REVER III

PTD

04/27/2004

Electronic Signature of Signing Officer or Director

_____ Date