

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000076232

FILED
Feb 08, 2011
Secretary of State

Entity Name: ANCHOR BENEFIT CONSULTING, INC.

Current Principal Place of Business:

2400 MAITLAND CENTER PKWY.
SUITE 111
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

2400 MAITLAND CENTER PKWY.
SUITE 111
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 59-3283085

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHIPPS, JOHN
111 2ND AVE. NE
SUITE 710
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

NORMAN, STEPHANIE
111 2ND AVE. NE
SUITE 710
ST. PETERSBURG, FL 33701 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: STEPHANIE NORMAN

02/08/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: PHIPPS, KATHRYN
Address: 111 2ND AVE. NE, SUITE 710
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: PST
Name: NORMAN, STEPHANIE G
Address: 111 2ND AVE. NE, SUITE 710
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: VP
Name: PHIPPS, KATHRYN M
Address: 111 2ND AVE. NE, SUITE 710
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: CFO
Name: EGBERT, KAREN
Address: 2400 MAITLAND CENTER PKWY., SUITE 111
City-St-Zip: MAITLAND, FL 32751 US

Title: COO
Name: WOODS, TERRI
Address: 2400 MAITLAND CENTER PKWY., SUITE 111
City-St-Zip: MAITLAND, FL 32751 US

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: KAREN EGBERT

CFO

02/08/2011

Electronic Signature of Signing Officer or Director

Date