FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000023769 (9)

1. Corporation Name
BENEFIT CONSULTANTS OF SOUTH FLORIDA, INC.

200001796912
-04/26/96--01100--005
***200.00

Principal Place of Business
1500 COLONIAL BLVD., SUITE 207
FT. MYERS FL 33907

Mailing Address
1500 COLONIAL BLVD., SUITE 207
FT. MYERS FL 33907

3. Date Incorporated or Qualified: 03/24/1995

3a. Date of Last Report: 3/24/95

4. FEI Number: 65-0568649 — Applied For / Not Applicable

2. Principal Place of Business
21 1700 MEDICAL Ln.
22 Suite, Apt. #, etc.:
23 City & State: FT. Myers FL
24 Zip: 33907 25 Country: Lee

2a. Mailing Address
26 1700 MEDICAL Ln.
27 Suite, Apt. #, etc.:
28 City & State: FT. Myers FL
29 Zip: 33907 30 Country: Lee

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FLEMING, DONALD W
1500 COLONIAL BLVD., SUITE 207
FT. MYERS FL 33907

10. Name and Address of New Registered Agent
81 Name:
82 Street Address (P.O. Box Number is Not Acceptable): 1700 MEDICAL LANE
83
84 City: FT Myers FL 85 Zip Code: 33907

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: DONALD W. FLEMING [signature] DATE: 3/11/96

Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
				☐ DELETE
				☐ DELETE
				☐ DELETE
				☐ DELETE
				☐ DELETE
				☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
1	Vice-Pres + SEC	SHARON E. Miller	1520 SAN CARLOS BAY Dr.	SANIBEL, FL. 33957	☐	☒
2	Treasurer	SUE A. FLEMMING	2716 SW 36th Lane	CAPE CORAL, FL 33914	☒	☒
3	DIRECTOR	SHARON E. Miller	1520 SAN CARLOS BAY Dr.	SANIBEL, FL. 33957	☐	☒
4	President	DONALD W. FLEMING	2716 SW 36th Lane	CAPE CORAL, FL 33914	☐	☒
5	DIRECTOR	DONALD W. FLEMING	SAME AS ABOVE		☐	☒
6	DIRECTOR	SUE A. FLEMMING	SAME AS ABOVE		☐	☒

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DONALD W. FLEMING [signature] 3-11-96 941-275-6888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)

4/26/96