

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000049880

Entity Name: BENCOMP NATIONAL CORP.

FILED
Jun 23, 2008
Secretary of State

Current Principal Place of Business:

1004 118TH AVE N
ST.PETERSBURG, FL 33716

New Principal Place of Business:

1004 118TH AVE N
ST. PETERSBURG, FL 33716

Current Mailing Address:

1004 118TH AVE N
ST.PETERSBURG, FL 33716

New Mailing Address:

1004 118TH AVENUE N
ST. PETERSBURG, FL 33716

FEI Number: 59-3319256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KADOURA, BRUCE
1002 118TH AVE N
ST.PETERSBURG, FL 33716 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KONICKI, ROBERT
Address: 17755 US HIGHWAY 19 NORTH, STE 400
City-St-Zip: CLEARWATER, FL 33764

Title: TS () Delete
Name: SCHMIDT, DALE F
Address: 1000 118TH AVE N
City-St-Zip: ST.PETERSBURG, FL 33716

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KONICKI, ROBERT W
Address: 1004 118TH AVENUE N
City-St-Zip: ST. PETERSBURG, FL 33716

Title: TS (X) Change () Addition
Name: SCHMIDT, DALE F
Address: 1000 118TH AVE N
City-St-Zip: ST. PETERSBURG, FL 33716

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: ROBERT W KONICKI

DP

06/23/2008

Electronic Signature of Signing Officer or Director

Date