

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000045199

FILED  
Oct 07, 2005  
Secretary of State

Entity Name: BENEFIT MANAGEMENT GROUP, INC.

## Current Principal Place of Business:

110 PONCE DE LEON STREET  
ROYAL PALM BEACH, FL 33411

## New Principal Place of Business:

## Current Mailing Address:

301 E. PINE STREET  
ORLANDO, FL 32802

## New Mailing Address:

110 PONCE DE LEON STREET  
ROYAL PALM BEACH, FL 33411

FEI Number: 65-0763010

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROGERS, RICHARD  
301 E. PINE STREET  
ORLANDO, FL 32802 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: RICHARD ROGERS

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: PSD ( ) Delete  
Name: EVELYN, KENNETH M  
Address: 1300 WOOD ROW WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: VPD ( ) Delete  
Name: EVELYN, SCOTT E  
Address: 1110 LONGLEA TERRACE  
City-St-Zip: WELLINGTON, FL 33414

Title: VP ( ) Delete  
Name: EVELYN, GLEN  
Address: 2204 RIDGEWOOD CIRCLE  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D ( ) Delete  
Name: HICKEY, KEVIN  
Address: 72 RIDGEBURY RD  
City-St-Zip: AVON, CT 06001

Title: VP ( ) Delete  
Name: TITCOMB, GORDON  
Address: 12971 HUNTLEY MANOR  
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP ( ) Delete  
Name: GOLDSTEIN, DENNIS S  
Address: 305 E. LAKEWOOD DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33405

## 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:

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: KENNETH M. EVELYN

PSD

10/07/2005

Electronic Signature of Signing Officer or Director

Date