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PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 MAR 17 AM 9:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P98000088420**

1. Corporation Name
BENSON INVESTMENT GROUP, INC.

Principal Place of Business	Mailing Address
~~32 FRESHWATER DR.~~ ~~PALM HARBOR FL 34684~~ 2	~~32 FRESHWATER DR.~~ ~~PALM HARBOR FL 34684~~ 2a

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/16/1998

4. FEI Number: 59-3537224 [ ] Applied For [ ] Not Applicable

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 owes the current year Intangible Personal Property Tax [X] Yes [ ] No

2. Principal Place of Business	2a. Mailing Address
21 Street: 2519 McMullen Booth Rd	26 Street: 2519 McMullen Booth Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 #105	27 #105
City & State	City & State
23 Clearwater FL	28 Clearwater FL
Zip / Country	Zip / Country
24 33761 25 Pinellas	29 33761 30 Pinellas

9. Name and Address of Current Registered Agent

MEYERS, JOSEPH II, CPA
801 W. BAY DR., STE. 200
LARGO FL 33770-3267

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

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: Joseph H Meyers 1/20/99
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required for filing) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	[ ] DELETE	11 TITLE	P	[ ] Change [✓] Addition
NAME	BENSON, GORDON S		12 NAME		
STREET ADDRESS	32 FRESHWATER DR.		13 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL 34684		14 CITY-ST-ZIP		
TITLE	D	[ ] DELETE	21 TITLE	V, T	[ ] Change [✓] Addition
NAME	BENSON, VERNA E		22 NAME	800002808582--15	
STREET ADDRESS	32 FRESHWATER DR.		23 STREET ADDRESS	-03/17/99--01006--023	
CITY-ST-ZIP	PALM HARBOR FL 34684		24 CITY-ST-ZIP	****150.00 ****150.00	
TITLE	D	[ ] DELETE	31 TITLE		[ ] Change [ ] Addition
NAME	BENSON, W. FRED		32 NAME		
STREET ADDRESS	4290 UNIVERSITY AVE.		33 STREET ADDRESS		
CITY-ST-ZIP	PROVO UT 83604		34 CITY-ST-ZIP		
TITLE	I	[ ] DELETE	41 TITLE	S	[ ] Change [✓] Addition
NAME			42 NAME	Rose S. Benson	
STREET ADDRESS			43 STREET ADDRESS	2024 Bellair Rd	
CITY-ST-ZIP			44 CITY-ST-ZIP	Clearwater, FL 33761	
TITLE		[ ] DELETE	51 TITLE		[ ] Change [ ] Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		[ ] DELETE	61 TITLE		[ ] Change [ ] Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

CR2E034 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: Gordon S Benson 3/16/99 727 723-2661
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)