

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****May 01, 2000 08:00 AM**
Secretary of State**DOCUMENT # P98000103276****1. Entity Name**
BENEFITS COORDINATORS, INC.**Principal Place of Business**
6021 CANTON DE CHELLEY COURT
ORLANDO FL 32810**Mailing Address**
6021 CANTON DE CHELLEY COURT
ORLANDO FL 32810**2. Principal Place of Business**
6021 CANYON DE CHELLEY COURT**3. Mailing Address**
6021 CANYON DE CHELLEY COURT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
ORLANDO FL**City & State**
ORLANDO FL**4. FEI Number**
59-3550208**Applied For**
Not Applicable**Zip**
32810**Country****Zip**
32810**Country****5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required****6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****WAISOME S. DALTON**
6021 CANTON DE CHELLEY COURT
ORLANDO FL 32810**Name**
WAISOME S. DALTON
Street Address (P.O. Box Number is Not Acceptable)
6021 CANYON DE CHELLEY COURT
City
ORLANDO **FL** **Zip Code**
32810**8. 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**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

05/01/2000

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒
(See criteria on back)**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing Trust Fund Contribution.** ☐ **\$5.00 May Be Added to Fees****11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11****TITLE**
NAME **WAISOME Verna M** ☐ Delete
STREET ADDRESS
6021 CANTON DE CHELLEY COURT
CITY-ST-ZIP
ORLANDO FL 32810**TITLE**
NAME **WAISOME Verna M** ☒ Change ☐ Addition
STREET ADDRESS
6021 CANYON DE CHELLEY COURT
CITY-ST-ZIP
ORLANDO FL 32810**TITLE**
NAME **WAISOME S. DALTON** ☐ Delete
STREET ADDRESS
6021 CANTON DE CHELLEY COURT
CITY-ST-ZIP
ORLANDO FL 32810**TITLE**
NAME **WAISOME S. DALTON** ☒ Change ☐ Addition
STREET ADDRESS
6021 CANYON DE CHELLEY COURT
CITY-ST-ZIP
ORLANDO FL 32810**TITLE**
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP**TITLE**
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP**TITLE**
NAME ☐ Delete
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CITY-ST-ZIP**TITLE**
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP**13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.****SIGNATURE** **S. DALTON WAISOME****D** **05/01/2000**