

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P98000107282**

1. Entity Name  
**BENSON CALDWELL ASSOCIATES, INC.**



Principal Place of Business  
11540 VILLA GRAND  
UNIT 1209  
FORT MYERS FL 33913

Mailing Address  
11540 VILLA GRAND  
UNIT 1209  
FORT MYERS FL 33913

2. Principal Place of Business  
**720 ST. GEORGE'S CT**

3. Mailing Address  
**720 ST. GEORGE'S CT**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**NAPLES, FL**

City & State  
**NAPLES, FL**

Zip  
**34110**

Country  
**U.S.A.**

Zip  
**34110**

Country  
**USA**

4. FEI Number  
**65-0883117**

Applied For  
 Not Applicable

5. Certificate of Status Desired  
 **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name

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

City

**FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

**THOMAS B. ZMACH**

**1/8/03**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution  
 **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
**PD**  
NAME  
**ZMACH, THOMAS B**  
STREET ADDRESS  
**11540 VILLA GRAND**  
CITY-ST-ZIP  
**FORT MYERS FL 33913**

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

**720 ST. GEORGE'S CT  
NAPLES, FL 34110**

TITLE  
**VD**  
NAME  
**ZMACH, COURTNEY C**  
STREET ADDRESS  
**11540 VILLA GRAND**  
CITY-ST-ZIP  
**FORT MYERS FL 33913**

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

**720 ST. GEORGE'S CT  
NAPLES, FL 34110**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**THOMAS B. ZMACH**

**1/8/03 (239)596-5331**

SIGNATURE:

**SIGNATURE REQUIRED  
PRESIDENT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

10/02