

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000078463

FILED  
May 17, 2002 8:00 AM  
Secretary of State

Entity Name: BENCHMARK DESIGN SERVICES, INC.

**Current Principal Place of Business:**

705 EAST OAK STREET  
SUITE A  
KISSIMMEE, FL 34744 US

**New Principal Place of Business:**

**Current Mailing Address:**

705 EAST OAK STREET  
SUITE A  
KISSIMMEE, FL 34744 US

**New Mailing Address:**

FEI Number: 59-3597889      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

HAYES, ROBERT S  
441 W VINE STREET  
KISSIMMEE, FL 34741 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: MADDEN, RANDY M  
Address: 1661 BIG OAK LANE  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: MADDEN, RANDY M  
Address: 705 EAST OAK STREET, SUITE A  
City-St-Zip: KISSIMMEE, FL 34744 US

Title: V ( ) Change (X) Addition  
Name: HAMPTON, LEON L  
Address: 705 EAST OAK STREET, SUITE A  
City-St-Zip: KISSIMMEE, FL 34744 US

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: RANDY M. MADDEN

PSTD

05/17/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date