

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V38032

FILED
Apr 30, 2009
Secretary of State

Entity Name: NATIONAL BENEFIT SERVICE CENTER, INC.

Current Principal Place of Business:

44 E. CENTRAL BLVD.
ORLANDO, FL 32801 US

New Principal Place of Business:

581 ARAPAHO TR.
MAITLAND, FL 32751 US

Current Mailing Address:

P.O. BOX 948094
MAITLAND, FL 327948094 US

New Mailing Address:

FEI Number: 59-3118674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEUMER, STEVE
581 ARAPAO TR
MAITLAND, FL 32751 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BEUMER, DENISE
Address: 581 ARAPAHO TRL
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: BEUMER, STEVE
Address: 581 ARAPAHO TR
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: WINSTON, CATHEDRA
Address: 581 ARAPAHO TR.
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: BEUMER, STEVEN E
Address: 581 ARAPAHO TR.
City-St-Zip: MAITLAND, FL 32751 US

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEVE BEUMER

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04/30/2009

Electronic Signature of Signing Officer or Director

Date