

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 482510

Entity Name: SELLERS BENEFITS GROUP, INC.**Current Principal Place of Business:**300 AVENUE OF THE CHAMPIONS
SUITE 240
PALM BEACH GARDENS, FL 33418-3618**Current Mailing Address:**300 AVENUE OF THE CHAMPIONS
SUITE 240
PALM BEACH GARDENS, FL 33418-3618 US**FEI Number:** 59-1848050**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JONES FOSTER SERVICE, LLC
505 SOUTH FLAGLER DRIVE, STE 1100
WEST PALM BEACH, FL 33401 US*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**Officer/Director Detail :**

Title	PRESIDENT, CEO & DIRECTOR
Name	SELLERS, RONALD F
Address	300 AVENUE OF THE CHAMPIONS STE 240
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	VP
Name	YECKES, DAN
Address	300 AVENUE OF THE CHAMPIONS SUITE 240
City-State-Zip:	PALM BEACH GARDENS FL 33418-3618

Title	SECRETARY, TREASURER
Name	SHIPTON, MELODIE
Address	300 AVENUE OF THE CHAMPIONS SUITE 240
City-State-Zip:	PALM BEACH GARDENS FL 33418-3618

Title	VP
Name	DENMON, JULIE E
Address	300 AVENUE OF THE CHAMPIONS SUITE 240
City-State-Zip:	PALM BEACH GARDENS FL 33418-3618

I hereby 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 all other like empowered.

SIGNATURE: MELODIE SHIPTON**SECRETARY/TREASURER** 04/27/2021_____
Electronic Signature of Signing Officer/Director Detail_____
Date