## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H28774

Entity Name: VOLUNTARY EMPLOYEE BENEFITS ASSOCIATES,

**INCORPORATED** 

**Current Principal Place of Business:** 

6212 BAYSHORE BLVD APT E

TAMPA, FL 33611

**Current Mailing Address:** 

701 S. HOWARD AVE. STE. 106-340 TAMPA, FL 33606 US

FEI Number: 59-2467506 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DENNIS R. OLDEN 6212 BAYSHORE BLVD APT E TAMPA, FL 33611 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

**FILED** Jan 14, 2015

**Secretary of State** 

CC2193018991

## Officer/Director Detail:

Title

Address

OLDEN, DENNIS R Name

> 6212 BAYSHORE BLVD. APT E

City-State-Zip: TAMPA FL 33611

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: DENNIS R OLDEN Electronic Signature of Signing Officer/Director Detail **PRESIDENT** 

01/14/2015

Date