

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K78256

**Entity Name:** STEVENS & ASSOCIATES FRINGE BENEFIT CONSULTANTS, INC.

**FILED**  
**Jan 10, 2017**  
**Secretary of State**  
**CC8156609075**

**Current Principal Place of Business:**

1425 SE 14TH AVE  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

1425 SE 14TH AVE  
DEERFIELD BEACH, FL 33441

**FEI Number:** 65-0121849

**Certificate of Status Desired:** No

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

STEVENS, JAMES  
1425 SE 14TH AVE  
DEERFIELD BEACH, FL 33441 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	PSD	Title	VD
Name	STEVENS, JAMES G.	Name	STEVENS, BEATRICE F.
Address	1425 SE 14TH AVE	Address	1425 SE 14TH AVE
City-State-Zip:	DEERFIELD BEACH FL	City-State-Zip:	DEERFIELD BEACH FL

*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:** JAMES STEVENS

**PRESIDENT**

**01/10/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date