

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000144860

Entity Name: ADVANCE BENEFITS, LLC

Current Principal Place of Business:

3710 CORPOREX PARK DRIVE, SUITE 215
TAMPA, FL 33619

Current Mailing Address:

3710 CORPOREX PARK DRIVE, SUITE 215
TAMPA, FL 33619

FEI Number: 59-3760021

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PULS, JAMES M
3710 CORPOREX PARK DRIVE, SUITE 215
TAMPA, FL 33619 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

Authorized Person(s) Detail :

Title MGRM
Name FIRST FLORIDA INSURERS OF
TAMPA, LLC
Address 3710 CORPOREX PARK DRIVE, SUITE
215
City-State-Zip: TAMPA FL 33619

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JENNIFER ASEWICZ

REGULATORY AFFAIRS
ADMINISTRATOR

04/05/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date