

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000271

Entity Name: ALWAYS CARE BENEFITS, INC.

Current Principal Place of Business:

8485 GOODWOOD BLVD.
BATON ROUGE, LA 70806

Current Mailing Address:

8485 GOODWOOD BLVD
BATON ROUGE, LA 70806-7878 US

FEI Number: 72-1146709

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SANFORD, PAUL P
103 S. MONROE STREET
TALLAHASSEE, FL 32301 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 CHAIRMAN
Name STERNBERG, HANS J
Address 8485 GOODWOOD BLVD.
City-State-Zip: BATON ROUGE LA 70806

Title PRESIDENT
Name STERNBERG, ERICH
Address 8485 GOODWOOD BLVD.
City-State-Zip: BATON ROUGE LA 70806

Title CFO, SECRETARY, TREASURER
Name WILD, JEFFREY G
Address 8485 GOODWOOD BLVD.
City-State-Zip: BATON ROUGE LA 70806

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: JEFFREY G. WILD

**CFO, SECRETARY,
TREASURER**

02/27/2015

Electronic Signature of Signing Officer/Director Detail

Date