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May 06, 1999 8:00 am Secretary of State

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## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

| 1. Corporation  | MENT # 693720<br>IPLICITY PLAN, INC.   | ı                                   |  |  | ) BION (1914) BION (1914) ONSY (1915)             |
|---|--|-------------------------------------|--|--|---|
| Principal Place   | e of Business  | Mailing Address                     |  |  | i Bjølf blok blok blok blok ling                  |
|   |  | 1201 SOUTH ORLANDO AVE<br>SUITE 365 | NUE  |  |   |
|   |  | WINTER PARK FL 32789                |  | DO NOT WRITE IN THI  | S SPACE   |
|   |  |                                     |  | 3. Date Incorporated or Qualifed 07/09/1981  |   |
| 2. Principal P  | lace of Business   | 2a. Mailing Address                 |  | 4. FEI Number  | Applied For                                       |
| 21  |  | 26                                  |  | 59-2110130   | Not Applicable                                    |
| Suite, Apt.   | #, etc.  | Suite, Apt. #, etc.                 |  | 5. Certificate of Status Desired   | \$8.75 Additional                                 |
| 22  |  | 27                                  |  |  | Fee Required                                      |
| City & State  | е  | City & State                        |  | 6. Election Campaign Financing   | \$5.00 May Be                                     |
| Zip   | Country  | Zip                                 | Country                                      | Trust Fund Contribution  | Added to Fees                                     |
| 24  | 25   | <del></del>                         | 30   | <ol> <li>This corporation owes the current year In<br/>Personal Property Tax.</li> </ol>               | ntangible<br>□Yes <b>⊠</b> No                     |
|   | ·  | <del></del>                         |  | 10. Name and Address of New Registered   |   |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered 81 Name CT CORPORATION SYS |  |                                     |  |  |   |
| KNOPKE, KEENAN L  |  |                                     |  |  |   |
| 1201 SOUTH ORLANDO AVENUE   |  |                                     | 82 Street Ad                                 | dress 1200 PINE ISLAND RO  | AD J  |
| CLUTTE DOE  |  |                                     | 83   |  |   |
| WINTER PARK FL 32789  |  |                                     |  |  |   |
|   | /  |                                     | 84 City                                      | PLANTATION, FL 3332  | 4   |
| 11. Pursuant office or re   | to the provisions of Sections 607.050 egistered egent, or both, in the State | 2 and 607.1508, Florida Statutes    | s, the above-named conhorized by the corpora | poration submits this statement for the purpose of tion's board of directors. I hereby accept the appe | of changing its registered pintment as registered |
| SIGNATURE   | Signature, typed or printed name of registered ager                          | am                                  | Registered Agent signature requi             | HUMO 3116  | 199   |
| 12.   |  | ID DIRECTORS                        | 13.  | ADDITIONS/CHANGES TO OFFICERS A  | ND DIRECTORS IN 12                                |
| TITLE   | PASD   | ☐ DELETE                            |  | /P   | Change Addition                                   |
| NAME  | HEFFRON, BRENT F   |                                     |  | FLORES, SILVIO A.  | • • •   |
| STREET ADDRESS  | 1201 SOUTH ORLANDO AVEN  | UE #365                             |  | 507 CALLE SAN JOSE   |   |
| CITY-ST-ZIP   | WINTER PARK FL   |                                     |  | SANTURCE, PR 00910   |   |
| TITLE   | V  | DELETE                              | 2.1 TITLE [                                  |  | ☐ Change  |
| NAME  | KNOPKE, KEENAN L   | <b>7-</b>                           | 9  | ,<br>IENICAN, JOSEPH P. III  | _ , +   |
| STREET ADDRESS  | 11655 SW 177 AVE   |                                     |  | 10 VETERANS MEMORIAL BLVD  |   |
| CITY-ST-ZIP   | MIAMI FL 33186   |                                     |  | METAIRIE, LA 70005   |   |
| TITLE   | VP   | ☐ DELETE                            | 3.1 TITLE D                                  |  | ☐ Change ► Addition                               |
| NAME  | ROMANACH, GABRIEL  |                                     | • 10   | OWE, WILLIAM E.  | - · F   |
| STREET ADDRESS  | 11655 SW 117TH AVE   |                                     |  | 10 VETERANS MEMORIAL BLVD  | 1   |
| CITY-ST-ZIP   | MIAMI FL   |                                     |  | IETAIRIE, LA 70005   |   |
| TITLE   | AS   | DELETE                              |  | T/S  | Change Addition                                   |
| NAME  | PATRON, RONALD H   |                                     |  | MATASAVAGE, FRANK L.   |   |
| STREET ADDRESS  | 110 VETERANS BLVD  |                                     |  | 201 S ORLANDO AVE #365   |   |
|   | METAIRIE LA  |                                     | 1  | VINTER PARK, FL 32789  |   |
| CITY-ST-ZIP<br>TITLE  | S S  | M DELETE                            |  |  | ☐ Change  Addition                                |
| MANAGE  | OLVEY CORINNE I  | es occure                           | ,  | AS<br>BAHAN LOBALICE A   | □ overide ■ vocition                              |

METAIRIE, LA 0 WINTER PARK, FL 32789 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual rep or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the coal of action or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE

NAME

1201 S ORLANDO AVE, #365

AN TYPED OR PRINTED NAME

WINTER PARK FL

BUDDE, KENNETH C

110 VETERAN BLVD.

AS

Brent F. Heffron

☐ DELETE

April 14, 1999 (407) 740-7000

Change

☐ Addition

110 VETERANS MEMORIAL BLVD

METAIRIE, LA 70005

HEFFRON, BRENT F.

1201 S ORLANDO AVE #365

D/VP/AS

# 693720 512152-90293-65

### ADDENDUM TO PROFIT CORPORATION ANNUAL REPORT 1999 FOR THE BELOW LISTED CORPORATION WITH REFERENCE TO BLOCK 13, OFFICERS/DIRECTORS

### **DOCUMENT # 693720**

FEI Number 59-2110130

THE SIMPLICITY PLAN, INC. 1201 S. Orlando Avenue, Suite 365 Winter Park, FL 32789

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITION:

Title: P/AS

Name: Keenan L. Knopke

Address: 1201 S. Orlando Avenue, Suite 365

City/St/Zip: Winter Park, FL 32789