

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

0652969 AT

05-05-2003 90926 001 \*5,550.00

**DOCUMENT # 693720**

1. Entity Name  
**THE SIMPLICITY PLAN, INC.**



Principal Place of Business  
**1201 SOUTH ORLANDO AVENUE  
SUITE 365  
WINTER PARK FL 32789**

Mailing Address  
**ATTN : SALT  
PO BOX 11250  
NEW ORLEANS LA 70181-1250**



2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

CHECK HERE IF MAKING CHANGES  
**59-3506520**

4. FEI Number **59-2110100** Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM  
1200 PINE ISLAND ROAD  
PLANTATION FL 33324**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VAS HEFFRON, BRENT F 1201 SOUTH ORLANDO AVENUE #365 WINTER PARK FL 32789</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PAS KNOPKE, KEENAN L 1201 S ORLANDO AVE, SUITE 365 WINTER PARK FL 32789</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP ROMANACH, GABRIEL 8200 SW 40TH STREET MIAMI FL 33155</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS TRAHAN, LORALICE A 110 VETERANS MEMORIAL BLVD METAIRIE LA 70005</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TS FRIOU, THOMAS H 1201 S ORLANDO AVE STE 365 WINTER PARK FL 32789</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ASD BUDE, KENNETH C 110 VETERANS MEMORIAL BLVD METAIRIE LA 70005</b>	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>See attached sheet for complete list of Officers/Directors</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Loralice A. Trahan* **SIGNATURE REQUIRED** **4/30/03** **504-837-5880**  
Loralice A. Trahan Assistant Secretary Date Daytime Phone #

CR2E034 (10/02)

# ATTACHMENT

The Simplicity Plan, Inc.

2003 For Profit Corporation Uniform Business Report (UBR)

Document # 693720

55037483

## Officers

<u>Name</u>	<u>Title</u>	<u>Address</u>
Brent F. Heffron	President/Asst Sec	1201 S. Orlando Ave., Suite 365, Winter Park, FL 32789
Mark A. Panter	Exec Vice President/Asst Sec	5101 N. Nebraska Ave., Tampa, FL 33603
Jack Yent, Jr.	Exec Vice President/Asst Sec	1201 S. Orlando Ave., Suite 365, Winter Park, FL 32789
Gabriel E. Romanach	Exec Vice President/Asst Sec	8200 S.W. 40th St., Miami, FL 33155
William E. Rowe	Vice President	110 Veterans Memorial Blvd., Metairie, LA 70005
Brian J. Marlowe	Vice President	110 Veterans Memorial Blvd., Metairie, LA 70005
Thomas H. Friou	Secretary and Treasurer	1201 S. Orlando Ave., Suite 365, Winter Park, FL 32789
Loralice A. Trahan	Asst. Secretary/Asst. Treasurer	110 Veterans Memorial Blvd., Metairie, LA 70005
Kenneth C. Budde	Asst. Secretary/Asst. Treasurer	110 Veterans Memorial Blvd., Metairie, LA 70005

## Directors

<u>Name</u>	<u>Address</u>
William E. Rowe	110 Veterans Memorial Blvd., Metairie, LA 70005
Brian J. Marlowe	110 Veterans Memorial Blvd., Metairie, LA 70005
Kenneth C. Budde	110 Veterans Memorial Blvd., Metairie, LA 70005