2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 693720

Entity Name: THE SIMPLICITY PLAN, INC.

Current Principal Place of Business:

1929 ALLEN PARKWAY HOUSTON. TX 77019

Current Mailing Address:

1929 ALLEN PARKWAY

TAX DEPT

HOUSTON, TX 77019 US

FEI Number: 59-3506520 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS ST 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

JEFFERSON LA 70121

FILED May 03, 2022

Secretary of State

9641591646CC

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title VICE PRESIDENT

Name LONGINO, NOBLE L Name LACOUR, ANGELA M

Address 1929 ALLEN PARKWAY Address 1333 S CLEARVIEW PKWY

TAX DEPT

City-State-Zip: HOUSTON TX 77019

Title VICE PRESIDENT, DIRECTOR

Name KEY, JANET S

Address 1929 ALLEN PARKWAY

Address 1929 ALLEN PARKWAY

TAX DEPT City-State-Zip: HOUSTON TX 77019

City-State-Zip:

City-State-Zip: HOUSTON TX 77019

Title ASSISTANT SECRETARY

Title TREASURER Name GIBBS, BRENDA K

Name TRIESCH, MICHAEL G Address 1333 S. CLEARVIEW PARKWAY

Address 1929 ALLEN PARKWAY City-State-Zip: JEFFERSON LA 70121

TAX DEPT

City-State-Zip: HOUSTON TX 77019 Title VP

 Title
 ASST SECRETARY
 Name
 GUARA, MANUEL

 Name
 ROUNDTREE, LYNDI S
 Address
 8200 BIRD RD FL 2

 City-State-Zip:
 MIAMI FL 33155

Address 1929 ALLEN PARKWAY

City-State-Zip: HOUSTON TX 77019 Continues on page 2

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: MICHAEL G TRIESCH TREASURER

05/03/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP Title VP

Name ARGUE, PAMELA J Name GRUENDL, KEITH L

Address 4815 S. CLYDE MORRIS BLVD Address 2550 HIGHLANDS BLVD NORTH

City-State-Zip: PORT ORANGE FL 32129 City-State-Zip: PALM HARBOR FL 34684