

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000050112

**Entity Name:** DROP-RETIREMENT PLANNERS, INC.

**Current Principal Place of Business:**

2810 NW MLK AVE.  
OCALA, FL 34478

**Current Mailing Address:**

PO BOX 2693  
OCALA, FL 34478

**FEI Number:** 59-3675116

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BROWN, OSCAR  
2810 NW MLK AVE.  
OCALA, FL 34478 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            CEO  
Name            BROWN, OSCAR  
Address        PO BOX 2693  
City-State-Zip: Ocala FL 34478

Title            SECRETARY  
Name            B, E L  
Address        2810 NW MLK AVE.  
City-State-Zip: Ocala FL 34478

Title            VP  
Name            B, C L  
Address        2810 NW MLK AVE.  
City-State-Zip: Ocala FL 34478

*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:** OSCAR BROWN

CEO

04/09/2021

Electronic Signature of Signing Officer/Director Detail

Date