

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000063720

**Entity Name:** SOCIAL PLANNING, INC.

**Current Principal Place of Business:**

717 3RD STREET NW  
STEINHATCHEE, FL 32359

**Current Mailing Address:**

P.O. BOX 65  
STEINHATCHEE, FL 32539

**FEI Number: 47-4269729**

**Certificate of Status Desired: No**

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

BARDSLEY, RHONDA  
717 3RD STREET NW  
STEINHATCHEE, FL 32359 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 PS  
Name BARDSLEY, RHONDA  
Address 717 3RD STREET NW  
City-State-Zip: STEINHATCHEE FL 32359

*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: RHONDA BARDSLEY**

**OWNER**

**03/23/2017**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date