

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003170

Entity Name: AMERIPLAN CORPORATION**Current Principal Place of Business:**5000 LEGACY DR.
SUITE 300
PLANO, TX 75024-3115**Current Mailing Address:**5000 LEGACY DR.
SUITE 300
PLANO, TX 75024-3115 US**FEI Number:** 75-2452941**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 E. GAINES ST.
TALLAHASSEE, FL 32399 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	PCOO
Name	BLOOM, DANIEL
Address	5000 LEGACY DR. SUITE 300
City-State-Zip:	PLANO TX 75024-3115

Title	COBD
Name	BLOOM, DENNIS
Address	5000 LEGACY DR. SUITE 300
City-State-Zip:	PLANO TX 75024-3115

Title	D
Name	BLOOM, DANIEL
Address	5000 LEGACY DR. SUITE 300
City-State-Zip:	PLANO TX 75024-3115

Title	D
Name	BLOOM, DENNIS
Address	5000 LEGACY DR. SUITE 300
City-State-Zip:	PLANO TX 75024-3115

Title	SD
Name	BLOOM, DANIEL
Address	5000 LEGACY DR. SUITE 300
City-State-Zip:	PLANO TX 75024-3115

Title	CEO
Name	BLOOM, DENNIS
Address	5000 LEGACY DR. SUITE 300
City-State-Zip:	PLANO TX 75024-3115

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: DANIEL BLOOM**PRESIDENT****02/20/2020**

Electronic Signature of Signing Officer/Director Detail

Date