

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90385 040 \*\*\*150.00

**DOCUMENT # 848370**

1. Entity Name  
LINCOLN INVESTMENT PLANNING, INC.



Principal Place of Business  
THE FORST PAVILION  
218 GLENSIDE AVE.  
WYNCOTE, PA 19095

Mailing Address  
THE FORST PAVILION  
218 GLENSIDE AVE.  
WYNCOTE, PA 19095



04132007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
23-1702591

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 SO PINE ISLAND RD  
PLANTATION, FL 33324

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	CD
NAME	FORST, EDWARD S SR
STREET ADDRESS	218 GLENSIDE AVE
CITY-ST-ZIP	WYNCOTE, PA 19095
TITLE	PD
NAME	FORST, JR., EDWARD
STREET ADDRESS	218 GLENSIDE AVE
CITY-ST-ZIP	WYNCOTE, PA 19095
TITLE	D
NAME	FORST, ROSEMARIE
STREET ADDRESS	218 GLENSIDE AVE
CITY-ST-ZIP	WYNCOTE, PA 19095
TITLE	VD
NAME	FORST, THOMAS
STREET ADDRESS	218 GLENSIDE AVE
CITY-ST-ZIP	WYNCOTE, PA 19095
TITLE	D
NAME	FORST-PAULUS, MARIELLEN
STREET ADDRESS	218 GLENSIDE AVE
CITY-ST-ZIP	WYNCOTE, PA 19095
TITLE	SD
NAME	O'NEILL, KARENA
STREET ADDRESS	218 GLENSIDE AVE
CITY-ST-ZIP	WYNCOTE, PA 19095

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** (X)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward Forst, Jr./President 4/18/07

Date

215-887-8111

Daytime Phone #

# ATTACHMENT

40087311

## Lincoln Investment Planning, Inc. Annual Report

Document #848370

FEI #23-1702591

### Additional Corporate Officer/Director

Name	Address	Title
Harry S. Forst	218 Glenside Avenue Wyncote, PA 19095	Treasurer/Director