

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003106

Entity Name: PAYMENT PLANS, INC.

FILED
Mar 20, 2006
Secretary of State

Current Principal Place of Business:

2741 TRANSIT ROAD
ELMA, NY 14059

New Principal Place of Business:

Current Mailing Address:

2741 TRANSIT ROAD
P.O. BOX 317
ELMA, NY 14059

New Mailing Address:

2741 TRANSIT ROAD
ELMA, NY 14059

FEI Number: 16-0817807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PANFIL, WALTER J
8052 LINKS WAY
PORT ST LUCIE, FL 34986 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSC () Delete
Name: ECKIS, JOHN C
Address: 2741 TRANSIT ROAD
City-St-Zip: ELMA, NY 140590317

Title: D () Delete
Name: BERTHY, RICHARD J
Address: 777 WEST ELMWOOD DR., STE 301
City-St-Zip: DAYTON, OH 45459

Title: D () Delete
Name: PANFIL, WALTER J
Address: 8052 LINKS WAY
City-St-Zip: PORT ST LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOHN C. ECKIS

PSC

03/20/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date