

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000000696

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** UNITED LEGAL PLANS CORPORATION

**Current Principal Place of Business:**

ONE PROGRESS PLAZA  
SUITE 720  
ST. PETERSBURG, FL 33701

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 120  
ST. PETERSBURG, FL 33731

**New Mailing Address:**

**FEI Number:** 27-0943776

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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

**OFFICERS AND DIRECTORS:**

Title: CPT  
Name: FOLLETT, RICHARD L II  
Address: P.O. BOX 120  
City-St-Zip: ST. PETERSBURG, FL 33731

Title: VS  
Name: FOLLETT, BEAU R  
Address: P.O. BOX 120  
City-St-Zip: ST. PETERSBURG, FL 33731

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: RICHARD L. FOLLETT, II

CPT

05/01/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date