

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Feb 26, 2001 8:00 am
Secretary of State

02-26-2001 90536 039 ***150.00

0062349

DOCUMENT # P00000045299

1. Entity Name

THE DIVORCE PLANNING GROUP, INC.

Principal Place of Business

**1802 JANICE AVE.
ORLANDO FL 32803**

Mailing Address

**1802 JANICE AVE.
ORLANDO FL 32803**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3649729

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SMITH, LINDA D
1802 JANICE AVE.
ORLANDO FL 32803**

7. Name and Address of New Registered Agent

Name **CHRISTIAN A NIELSEN**

Street Address (P.O. Box Number is Not Acceptable)

1802 JANICE AVCity **ORLANDO****FL**Zip Code **32803**

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.

SIGNATURE

Linda D Smith

(NOTE: Registered Agent signature required when reinstating)

DATE

2-20-019. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

**OFFICER
LINDA D SMITH
1802 JANICE AV
ORLANDO FL 32803**TITLE ☐ Change ☒ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

**OFFICER
CHRISTIAN A NIELSEN
1802 JANICE AV
ORLANDO FL 32803**TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Linda D Smith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**2-20-01**

Date

407-896-1553

Daytime Phone #

CR2E034 (10/00)