

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004 8:00 am
Secretary of State

04-27-2004 90069 014 ***150.00

DOCUMENT # P01000004783 1. Entity Name ACCESS INSURANCE PLANNERS, INC.			
Principal Place of Business 1749 N E 26TH STREET FORT LAUDERDALE, FL 33305		Mailing Address 1749 N E 26TH STREET FORT LAUDERDALE, FL 33305	
2. Principal Place of Business 2850 N. ANDREWS AVE Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State FT. LAUDERDALE FL		City & State _____	
Zip 33311		Country BROWARD	
6. Name and Address of Current Registered Agent ZADEN, RICHARD J 1749 N E 26TH STREET FORT LAUDERDALE, FL 33305		7. Name and Address of New Registered Agent Name WARDELL, PHILLIP Street Address (P.O. Box Number Not Acceptable) 2850 N. ANDREWS FT. LAUDERDALE FL 33311	
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: <u><i>Phillip M. Wardell</i></u> Phillip M. Wardell <u>4/19/04</u> Signature, typed or printed name of registered agent and the applicable (NOTE: Registered Agent signature required when renewing) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D ☐ Delete NAME WARDELL, PHILLIP STREET ADDRESS 1749 N E 26TH STREET CITY-ST-ZIP FORT LAUDERDALE, FL 33305	TITLE D ☐ Delete NAME WARDELL, HARRY STREET ADDRESS 1749 N E 26TH STREET CITY-ST-ZIP FORT LAUDERDALE, FL 33305	TITLE D ☐ Delete NAME WARDELL, JAMES A STREET ADDRESS 1749 N E 26TH STREET CITY-ST-ZIP FORT LAUDERDALE, FL 33305	TITLE D ☐ Delete NAME WARDELL, RONALD STREET ADDRESS 1749 N E 26TH STREET CITY-ST-ZIP FORT LAUDERDALE, FL 33305
TITLE D ☐ Delete NAME WARDELL, RONALD STREET ADDRESS 1749 N E 26TH STREET CITY-ST-ZIP FORT LAUDERDALE, FL 33305	TITLE D ☐ Delete NAME ZADEN, RICHARD J STREET ADDRESS 1749 N E 26TH STREET CITY-ST-ZIP FORT LAUDERDALE, FL 33305	TITLE D ☐ Delete NAME SEILER, JOHN P STREET ADDRESS 2900 E OAKLAND PK BLVD CITY-ST-ZIP FORT LAUDERDALE, FL 33306	TITLE D ☐ Delete NAME WARDELL, PHILLIP STREET ADDRESS 2850 N. ANDREWS AVE CITY-ST-ZIP FT. LAUDERDALE, FL 33311
TITLE D ☐ Delete NAME WARDELL, HARRY STREET ADDRESS 1749 N E 26TH STREET CITY-ST-ZIP FORT LAUDERDALE, FL 33305	TITLE D ☐ Delete NAME WARDELL, JAMES A STREET ADDRESS 1749 N E 26TH STREET CITY-ST-ZIP FORT LAUDERDALE, FL 33305	TITLE D ☐ Delete NAME WARDELL, RONALD STREET ADDRESS 1749 N E 26TH STREET CITY-ST-ZIP FORT LAUDERDALE, FL 33305	TITLE D ☐ Delete NAME WARDELL, PHILLIP STREET ADDRESS 2850 N. ANDREWS AVE CITY-ST-ZIP FT. LAUDERDALE, FL 33311
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u><i>Phillip M. Wardell</i></u> SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		<u>4-19-04</u> <u>954-565-4666</u> Date Daytime Phone #	