

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000027109

FILED
Jan 06, 2009
Secretary of State

Entity Name: PLAN COMPLIANCE SERVICES, INC.

Current Principal Place of Business:

5455 WEST WATERS AVENUE
SUITE 211
TAMPA, FL 33634

New Principal Place of Business:

8481 WEST LINEBAUGH AVENUE
TAMPA, FL 33625

Current Mailing Address:

5455 WEST WATERS AVENUE
SUITE 211
TAMPA, FL 33634

New Mailing Address:

8481 WEST LINEBAUGH AVENUE
TAMPA, FL 33625

FEI Number: 59-3708427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWER, TERRANCE P
5455 WEST WATERS AVENUE
SUITE 211
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

POWER, TERRANCE P
8481 WEST LINEBAUGH AVENUE
TAMPA, FL 33625 US

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: TERRANCE P POWER

01/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POWER, TERRANCE P
Address: 5455 WEST WATERS AVENUE, SUITE 211
City-St-Zip: TAMPA, FL 33634

Title: S () Delete
Name: POWER, TERRANCE P
Address: 5455 WEST WATERS AVENUE, SUITE 211
City-St-Zip: TAMPA, FL 33634

Title: D () Delete
Name: POWER, TERRANCE P
Address: 5455 WEST WATERS AVENUE, SUITE 211
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POWER, TERRANCE P
Address: 8481 WEST LINEBAUGH AVENUE
City-St-Zip: TAMPA, FL 33625

Title: S (X) Change () Addition
Name: POWER, TERRANCE P
Address: 8481 WEST LINEBAUGH AVENUE
City-St-Zip: TAMPA, FL 33625

Title: D (X) Change () Addition
Name: POWER, TERRANCE P
Address: 8481 WEST LINEBAUGH AVENUE
City-St-Zip: TAMPA, FL 33625

I hereby certify that the information supplied with this filing does not qualify 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: TERRANCE P POWER

P

01/06/2009

Electronic Signature of Signing Officer or Director

Date