2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085504

City-St-Zip:

PLANT CITY, FL 33567

Entity Name: GROUP PLANS SOLUTIONS, INC.

FILED Feb 04, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:	
	TH FLORIDA D, FL 33813	AVE. SUITE 405		
Current Mailing Address:			New Mailing Address:	
P.O. BOX LAKELANI	5164 D, FL 338075	164		
FEI Number	: 55-0797037	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
2609 DEEI	, DON A SR RBROOK DR D, FL 33811	US		
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
SIGNATUR	RE:			
Electronic Signature of Registered Agent			ent	Date
Election Car	mpaign Financir	ng Trust Fund Contribution ().		
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PSDT (BENNETT, DC 2609 DEERBF LAKELAND, F	ROOK DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	HOWARD, ST	CREST DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address:	ROBB, JOHN) Delete R THACKERY WAY	Title: Name: Address:	() Change () Addition

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.

City-St-Zip:

SIGNATURE: DON A. BENNETT SR. PSDT 02/04/2009