

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000032936

Entity Name: ACCEPT PLUS, INC.

FILED  
Apr 27, 2007  
Secretary of State

**Current Principal Place of Business:**

5815 OXFORD DR.  
TAMPA, FL 33615

**New Principal Place of Business:**

805 STRAW LAKE DR  
BRANDON, FL 33510 US

**Current Mailing Address:**

PO BOX 403  
BRANDON, FL 33509

**New Mailing Address:**

PO BOX 403  
BRANDON, FL 33509 US

FEI Number: 59-3770253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REIFSNYDER, SCOTT  
5815 OXFORD DR.  
TAMPA, FL 33615 US

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

REIFSNYDER, SCOTT  
805 STRAW LAKE DR  
BRANDON, FL 33510 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/27/2007

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: REIFSNYDER, SCOTT  
Address: 3612 HWY 92 E  
City-St-Zip: PLANT CITY, FL 33596

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SCOTT REIFSNYDER

D

04/27/2007

Electronic Signature of Signing Officer or Director

Date