

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000098165

FILED
Apr 13, 2011
Secretary of State

Entity Name: PLAPPERT INSURANCE GROUP, INC.

Current Principal Place of Business:

2801 SW COLLEGE ROAD, SUITE 12
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

2801 SW COLLEGE ROAD, SUITE 12
OCALA, FL 34474

New Mailing Address:

FEI Number: 26-3646417

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLAPPERT, STANLEY W
2801 SW COLLEGE ROAD, SUITE 12
OCALA, FL 34474 US

Name and Address of New Registered Agent:

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

_____ Date

OFFICERS AND DIRECTORS:

Title: PD
Name: PLAPPERT, STANLEY W
Address: 4816 SW 28TH ST.
City-St-Zip: Ocala, FL 34480

I hereby 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 all other like empowered.

SIGNATURE: STANLEY W PLAPPERT

PRES

04/13/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date