

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *page 1*

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # *PO8004*

1. Corporation Name **FFP Financial Planning, Inc.**

FILED
97 APR -7 AM 8:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address

c/o First Financial Planners, Inc.
15455 Conway Road
Chesterfield, MO 63017

REINSTATEMENT *91-017*

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 3. New Mailing Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE

4. Date Incorporated or Qualified To Do Business in Florida
11/5/85

5. FEI Number

43-1298712

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P/T/D	Roy M. Henry	2031 Kehrsboro	Chesterfield, MO 63017
V/D	Robert H. Rodermund	17134 Surrey View Dr.	Chesterfield, MO 63017
S	April L. Davis	238 Royall Springs Pkwy.	O'Fallon, MO 63366
D	Dan Hirsch	1325 Conway Oaks Drive	Chesterfield, MO 63017

200002136082-9
-04/08/97-01000-0119
*****1636.25 ***1636.25**

8. Name and Address of Current Registered Agent

C.T. Corporation System

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

See Letter

Date

REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert H. Rodermund

3/27/97

314-537-1040

Date

Daytime Phone #

CR2E040 (12/95)

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ACCEPTANCE OF APPOINTMENT

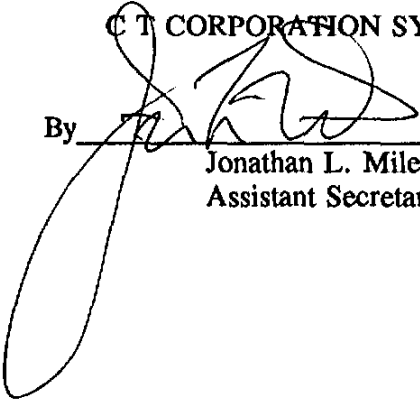
RE: FIRST FINANCIAL PLANNERS, INC. (Missouri Domestic)
(d/b/a FFP FINANCIAL PLANNING, INC.)

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: March 25, 1997

C T CORPORATION SYSTEM

By


Jonathan L. Miles,
Assistant Secretary