

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000089032

FILED
Mar 09, 2010
Secretary of State

Entity Name: YOUR FLORIDA LEGAL PLAN, INC.

Current Principal Place of Business:

8845 CHAMBORE DRIVE
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

8845 CHAMBORE DRIVE
JACKSONVILLE, FL 32256 US

New Mailing Address:

FEI Number: 27-1192619 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 EAST GAINES STREET
TALLAHASSEE, FL 32399 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: HIGGINS, MICHAEL J
Address: 8845 CHAMBORE DRIVE
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: VP
Name: HIGGINS, MICHAEL J
Address: 8845 CHAMBORE DRIVE
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: S
Name: HIGGINS, MICHAEL J
Address: 8845 CHAMBORE DRIVE
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: T
Name: HIGGINS, MICHAEL J
Address: 8845 CHAMBORE DRIVE
City-St-Zip: JACKSONVILLE, FL 32256 US

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: MICHAEL J. HIGGINS

P

03/09/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date