SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000019093 (2)

RETIREMENT PLANNING SPECIALISTS, INC.

Principal Place of Business Mailing Address 6322 PAÙMA DEL MAR BLVD 8 P O BOX 66851 **STE 505** ST PETE BOH FL 33736 DO NOT WRITE IN THIS SPACE ST PETERSBUG FL 33715 3. Date Incorporated or Qualified 3a. Date of Last Report 03/12/1993 4. FEI Number 07/26/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable 59-3172225 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BROIDA & NAPIER P.A. % JOEL D. BROIDA 82 Street Address (P.O. Box Number is Not Acceptable) 605 - 75TH AVE. 83 ST. PETERSBURG BEACH FL 33708 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 11 TITLE Change Addition NAME JOHNSON, DONALD E 12 NAME 000002252670--STREET ADDRESS % 605 - 75TH AVE. 1.3 STREET ADDRESS -07/30/97--01077--015 CITY-ST-ZIF ST. PETERSBURG BEACH FL 33706 1.4 CITY - ST - ZIP ****165.00 TITLE DELETE 2.1 TITLE NAME J**OHNSON, JENNIFER C** 2.2 NAME STREET ADDRESS % 605 - 75TH AVE. 2.3 STREET ADDRESS CITY-ST-ZIF ST. PETERSBURG BEACH FL 33706 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change ■ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Addition Change NAME 6.2 NAME

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 12 or Block 13 if change nent with an address.

6.3 STREET ADDRESS

64 CITY-ST-ZIP

FILED

97 JUL 24 AM 8: 11

CALLANASCE, FLORIDA

July 21, 1997

Division of Corporations Annual Reports Section P.O. Box 6327 Tallahassee, FL 32314

Dear Annual Reports Section:

I called your office today and explained that I just received a second notice for paying my annual corporation dues, but that I did not ever receive your first notice at my mailing address.

They told me to mail in this 2nd notice with a check for \$165 and this letter of explanation.

Thank you.

Sincerely

Donald B. Johnson

President

