FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # P94000051143

1. Corporation Name
Financial Planners, Inc.

Principal Place of Business
2095 Sunset Pt. Rd. #1502
Clearwater, FL 33765

Mailing Address
2095 Sunset Pt. Rd. #1502
Clearwater, FL
33765

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 2095 Sunset Pt. Rd.
22 Suite, Apt. #, etc. #1502
23 City & State: Clearwater, FL
24 Zip 33765 25 Country Pinellas

2a. Mailing Address
26 2095 Sunset Pt. Rd.
27 Suite, Apt. #, etc. #1502
28 City & State: Clearwater, FL
29 Zip 33765 30 Country Pinellas

3. Date Incorporated or Qualified 7/12/94

4. FEI Number 59-3267148 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible 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 D. A. Van Alen
82 Street Address (P.O. Box Number is Not Acceptable) 2095 Sunset Pt. Rd. #1502
83
84 City Clearwater FL 85 Zip Code 33765

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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 D. Van Alen, pres. 4/27/98
(Signature typed or printed) (NOTE: Registered Agent signature required when changing) (DATE)

12. OFFICER(S) AND DIRECTOR(S)			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	Chairman John Ferlita	☒ DELETE	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	Pres D. Van Alen 2095 Sunset Pt. Rd #1502 Clearwater, FL 33765 ☒ Change ☐ Addition
21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP		☐ DELETE	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	☐ Change ☐ Addition
31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP		☐ DELETE	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	☐ Change ☐ Addition
41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ DELETE	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	☐ Change ☐ Addition 900002519689 -05/12/98--01019--039 ***150.00
51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ DELETE	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	☐ Change ☐ Addition 5.7
61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ DELETE	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/97)

14. I hereby certify that the information supplied with this filing complies with the requirements for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: D. Van Alen 4/27/98 (813) 224-9438
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #