

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000020018

Entity Name: FINANCIAL SECURITY PLUS, INC.

FILED
Apr 13, 2006
Secretary of State

Current Principal Place of Business:

7601 N 9TH AVE
PENSACOLA, FL 32514

New Principal Place of Business:

5645 WEST SHORE DRIVE
PENSACOLA, FL 32536

Current Mailing Address:

7601 N 9TH AVE
PENSACOLA, FL 32514

New Mailing Address:

5645 WEST SHORE DRIVE
PENSACOLA, FL 32536

FEI Number: 61-1139745

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWRENCE, DONALD R
3008 KNOTTY PINE DRIVE
PENSACOLA, FL 32505 US

Name and Address of New Registered Agent:

LAWRENCE, DONALD R
5645 WEST SHORE DRIVE
PENSACOLA, FL 32536 US

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:

04/13/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: LAWRENCE, DONALD R.
Address: 7601 N 19TH AVE #113
City-St-Zip: PENSACOLA, FL 32514

Title: PD () Delete
Name: LAWRENCE, PATRICIA PAGE
Address: 7601 N 9TH AVE
City-St-Zip: PENSACOLA, FL 32514

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change () Addition
Name: LAWRENCE, DONALD R.
Address: 5645 WEST SHORE DRIVE
City-St-Zip: PENSACOLA, FL 32536

Title: PD (X) Change () Addition
Name: LAWRENCE, PATRICIA PAGE
Address: 5645 WEST SHORE DRIVE
City-St-Zip: PENSACOLA, FL 32536

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PATRICIA PAGE LAWRENCE

PD

04/13/2006

Electronic Signature of Signing Officer or Director

Date