2003 FOR PROFIT CORPORATION

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000045008						FILED Jul 28, 2003 8:00 am Secretary of State			
DOCU	MENT# P99000 (045008ು∀್ಸ	7			07-28-2003 90146			;
1. Entity Nam SENIOR I	FINANCIAL PLANNERS, INC.	ON You				0. 20 2000 901 10			
11101 HERON #4916	I BAY BLVD	tailing Address 11101 HERON BAY BLVD #4916 CORAL SPRINGS FL 33076							
2. Principal F 3211 Suite, Apt.	BAYBETRY WAY	Mailing Address 321 BAYBE Suite, Apt. #, etc.	TRY WA	7		CHECK HERE IF MAK			
City & Stat	CATE, FL	City & State MARCATE,	FL		4. FE	Number 59-3576518	\ 	pplied For ot Applicable]
3306	3 BROWARD	^{zip} 33063	Country		5. Ce	rtificate of Status Desired	\$8.75 Ad Fee Require		
	6. Name and Address of Current Regi	stered Agent	Name		7. Na	me and Address of New Register	ed Agent		1_
DAVIS, JOHN E 11101 HERON BAY BLVD #4916				Street Address (P.O. Box Number is Not Acceptable)					
CORAL SPRINGS FL 33076						F	Zip Coo	le	
	named entity submits this statement for the ions of registered agent.	purpose of changing its re	egistered office o	r registere	ed agen	t, or both, in the State of Florida. Ta	ım familiar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent and title	e if applicable. (NOTE: F	Registered Agent signat	ture required v	when reins	tating) DAT	E		
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State				<u> </u>		Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees	-
10.	OFFICERS AND DIRE	CTORS	11.		ADDI	TIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 11	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, JOHN E 11101 HERON BAY BLVD, #4916 CORAL SPRINGS FL 33076	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	321 MAI	1 B RGA	AYBERRY WAY TE FL 33063	Change	☐ Addition	OE034 (4/03)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, BARBARA A 11101 HERON BAY BLVD, #4916 CORAL SPRINGS FL 33076	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	32 MA	11 E	BAYBERRY WAY HATE, FL 330	Change	☐ Addition	100
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	1
TITLE NAME STREET ADDRESS CITY-SI-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	
12. I hereby of indicated of the cor changed.	ertify that the information supplied with this on this report or supplemental report is true poration or the receiver or truetee empowere or on an attachment with an address, with a	filing does not qualify for the and accurate and that my do to execute this report as all other like empowered.	ne exemption sta	ted in Sec lave the se apter 607	tion 119 ame leg Florida	9.07(3)(i), Florida Statutes. I further all effect as if made under oath; that Statutes; and that my name appear	certify that the i t I am an officer s in Block 10 o	nformation or director r Block 11 if	<u> </u>

NATURED JOHN E. DAVIS

attachment