

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000046442

FILED
Mar 16, 2011
Secretary of State

Entity Name: APPLE INSURANCE & FINANCIAL PLANNING, INC.

Current Principal Place of Business:

4901 PALM BCH BLVD
STE 39
FORT MYERS, FL 33905

New Principal Place of Business:

4901 PALM BCH BLVD
STE 390
FORT MYERS, FL 33905

Current Mailing Address:

4901 PALM BCH BLVD
STE 39
FORT MYERS, FL 33905

New Mailing Address:

4901 PALM BCH BLVD
STE 390
FORT MYERS, FL 33905

FEI Number: 65-0943992

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARIVIERE, BRIAN T
4901 PALM BCH BLVD
#39
FORT MYERS, FL 33905 US

Name and Address of New Registered Agent:

LARIVIERE, BRIAN T
4901 PALM BCH BLVD
#390
FORT MYERS, FL 33905 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:

03/16/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSTD
Name: LARIVIERE, BRIAN T
Address: 4901 PALM BCH BLVD #390
City-St-Zip: FORT MYERS, FL 33905

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: BRIAN T LARIVIERE

PSTD

03/16/2011

Electronic Signature of Signing Officer or Director

Date