

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000087714

1. Entity Name

PERSONALIZED INVESTMENT PLANS, INC.

Principal Place of Business

104 GULF SHORE DRIVE
DESTIN FL 32541

Mailing Address

604 GULF SHORE DRIVE
DESTIN FL 32541

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

COLLINS, PATRICK M
604 GULF SHORE DRIVE
DESTIN FL 32541

4. FEI Number 59-3609596

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	<input type="checkbox"/> Delete
	COLLINS, PATRICK M	604 GULF SHORE DRIVE	DESTIN FL 32541	
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	<input type="checkbox"/> Delete
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TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

I, hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/24/01

Date

850-269-7624

Daytime Phone

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FILED

01 SEP 12 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

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September 7, 2001

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FLorida 32314

In re: 2001 Uniform Business Report
Personalized Investment Plans, Inc.
Patrick M. Collins

Dear Madame or Sir,

I spoke with your department today, Friday-September 7, 2001, in regards to this form that I submitted on April 24, 2001 with my check of \$150.00 - check and form copies enclosed.

They say they did not receive the form or the check. They also said to reissue a new check, No. 4040, and a copy of the form. Some how the check No. 3905 was never received at my bank. They said that the late fee would be waived and to send a copy of the form and a new check which I am doing.

I appreciate your attention into this matter.

Very truly yours,



Patrick M. Collins
Personalized Investment Plans, Inc.
604 Gulf Shore Drive
Destin, Florida 32541
(850) 269-7624

PMC:jh
Enclosures