## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 26, 2004 08:00 AM Secretary of State **DOCUMENT # P99000087714** T. Entity Name PERSONALIZED INVESTMENT PLANS, INC. Principal Place of Susiness Mailing Address 604 GULF SHORE DRIVE **604 GULF SHORE DRIVE** DESTIN, FL 32541 DESTIN, FL 32541 No Chg-P 03242004 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3609596 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 25 Fee Required 6. Name and Address of Current Registered Agent COLLINS, PATRICK M DO NOT WRITE 604 GULF SHORE DRIVE DESTIN, FL 32541 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent algorithm required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOWII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees U00000097245 <del>03/25/04-80032-</del>016-158.75 OFFICERS AND DIRECTORS 10. COLLINS, PATRICK M NAME 604 GULF SHORE DRIVE STREET ADDRESS DESTIN, FL 32541 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CHTY-ST-ZEP IN THIS SPACE WE. NAME STREET ADDRESS CMY-ST-ZIP HTLE NAME STREET ADDRESS CXTY - SX - ZXP TITLE NASIE STREET ADDRESS CITY-ST-ZP

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an officer or director.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

**FILED**