

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V12913

FILED  
Jan 30, 2007  
Secretary of State

Entity Name: PERFERRRED PLAN ASSOCIATION OF FLORIDA, INC.

**Current Principal Place of Business:**

955 S.E. FED. HWY  
SUITE 101  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

955 S.E. FED. HWY  
SUITE 101  
STUART, FL 34994

**New Mailing Address:**

FEI Number: 65-0401649      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SUNDHEIM, KENNETH C  
1886 NE MEDIA AVE  
JENSEN BEACH, FL 34957      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: PEERBHAI, IKE J  
Address: 1034 SW SQUARE JOHNS LN  
City-St-Zip: PALM CITY, FL 34990

Title: DVT ( ) Delete  
Name: BUCK, ELLSWORTH  
Address: 118 SW AIRVIEW AVE  
City-St-Zip: PORT ST LUCIE, FL 34954

Title: DS (X) Delete  
Name: SUNDKIN, KENNETH C  
Address: 1886 NE MEDIA AVE  
City-St-Zip: JENSEN BEACH, FL 34957

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ELLSWORTH BUCK

DVT

01/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date