2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V12913

FILED Jan 03, 2008 Secretary of State

Entity Name: PERFERRED PLAN ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
SUITE 10				
STUART,	FL 34994			
Current M	lailing Addre	ss:	New Mailing Address	s:
SUITE 10	ED. HWY FL 34994			
El Number	: 65-0401649	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
1886 NE N JENSEN E The above	M, KENNETH MEDIA AVE BEACH, FL 34 Inamed entity	1957 US	ourpose of changing its registere	d office or registered agent, or both,
1886 NE N JENSEN E The above n the State	MÉDIA AVE BEACH, FL 34 named entity e of Florida.	1957 US	ourpose of changing its registere	d office or registered agent, or both,
1886 NE N JENSEN E The above	MEDIA AVE BEACH, FL 34 named entity of Florida. RE:	1957 US		d office or registered agent, or both, Date
1886 NE N JENSEN E The above n the State BIGNATUI	MEDIA AVE BEACH, FL 34 named entity of Florida. RE: Electro	l957 US submits this statement for the բ		
1886 NE M JENSEN E The above n the Stati BIGNATUI	MEDIA AVE BEACH, FL 34 named entity of Florida. RE: Electro	submits this statement for the particles of Registered Age of Trust Fund Contribution ().	ent	
1886 NE M JENSEN E The above n the Stati BIGNATUI	MEDIA AVE BEACH, FL 34 named entity of Florida. RE: Electro mpaign Financin S AND DIRECTOR DP (PEERBHAI, IK	submits this statement for the particles of Registered Age of Trust Fund Contribution (). TORS:) Delete E J ARE JOHNS LN	ent	Date

I hereby certify that the information supplied with this filing does not qualify 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 01/03/2008