2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V12913

FILED Mar 24, 2009 Secretary of State

Entity Name: PERFERRED PLAN ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 955 S.E. FED. HWY 955 S.E. FEDERAL. HWY SUITE 101 SUITE 101 STUART, FL 34994 STUART, FL 34994 **New Mailing Address: Current Mailing Address:** 955 S.E. FED. HWY 955 S.E. FEDERAL. HWY SUITE 101 SUITE 101 STUART, FL 34994 STUART, FL 34994 FEI 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 of New Registered Agent: SUNDHEIM, KENNETH C 1886 NE MÉDIA AVE JENSEN BEACH, FL 34957 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition

Title: DP () Delete Title: DP (X) Change () Addition Name: PEERBHAI, IKE J Name: PEERBHAI, IKE J Address: 1034 SW SQUARE JOHNS LN Address: 82 SW PALM COVE DRIVE City-St-Zip: PALM CITY, FL 34990

() Delete Title: () Change () Addition

 Title:
 DVT
 () Delete
 Title:

 Name:
 BUCK, ELLSWORTH
 Name:

 Address:
 118 SW AIRVIEW AVE
 Address:

 City-St-Zip:
 PORT ST LUCIE, FL 34954
 City-St-Zip:

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 03/24/2009