

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F26156

**Entity Name:** UNITED FINANCIAL GROUP, INC.

**Current Principal Place of Business:**

1133 LOUISIANA AVENUE  
SUITE 200  
WINTER PARK, FL 32789

**Current Mailing Address:**

P.O. BOX 941313  
MAITLAND, FL 32794-1313 US

**FEI Number: 59-2088743**

**Certificate of Status Desired: No**

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

KAPLAN, HAROLD JCEO  
1133 LOUISIANA AVENUE  
SUITE 200  
WINTER PARK, FL 32789 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

**Officer/Director Detail :**

Title            CEO  
Name            KAPLAN, HAROLD J  
Address        1133 LOUISIANA AVENUE SUITE 200  
City-State-Zip: WINTER PARK FL 32789

Title            TCB  
Name            KAPLAN, HAROLD J  
Address        1133 LOUISIANA AVENUE, SUITE 200  
City-State-Zip: WINTER PARK FL 32780

Title            PCOO  
Name            KAPLAN, ANDREW  
Address        342 NEBRASKA AVENUE  
City-State-Zip: LONGWOOD FL 32750

Title            S  
Name            GOTTSCHALK, CRYSTAL  
Address        1340 UNITY COURT  
City-State-Zip: CASSELBERRY FL 32707

*I hereby 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 all other like empowered.*

**SIGNATURE: CRYSTAL GOTTSCHALK**

**SECRETARY**

**01/10/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date