2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000010164

Entity Name: PEO PROFESSIONALS, INC.

FILED Feb 28, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

2102 N. DUNDEE STREET 2101 N. DUNDEE STREET TAMPA, FL 33629 TAMPA, FL 33629

Current Mailing Address: New Mailing Address:

2102 N. DUNDEE STREET
TAMPA, FL 33629
2101 N. DUNDEE STREET
TAMPA, FL 33629

FEI Number: 59-3694831 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HOLCOMB, VICTOR W
106 S. TAMPANIA AVENUE
SUITE 200
TAMPA, FL 33606 US

ROSIER, TIMOTHY M
2101 N. DUNDEE ST.
TAMPA, FL 33629 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: TIMOTHY M. ROSIER 02/28/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: T. MICHAEL ROSIER, Name: ROSIER, TIMOTHY M

Address: 2101 N. DUNDEE STREET Address: 2101 N. DUNDEE STREET
City-St-Zip: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 33629

Title: () Delete Title: D () Change (X) Addition
Name: MENCIA RALPH

 Name:
 Name:
 MENCIA, RALPH

 Address:
 Address:
 11839 SAN JOSE BLVD.

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32223

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 COHEN, STEPHEN M

 Address:
 Address:
 301 EHRMANN ST.

 City-St-Zip:
 City-St-Zip:
 PENSACOLA, FL 32507

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TIMOTHY M ROSIER PRES 02/28/2004