

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000046657

FILED  
Apr 11, 2005  
Secretary of State

Entity Name: CUSTOM PAYROLL SOLUTIONS, INC.

## Current Principal Place of Business:

2119 NW 11 DR  
CHEIFLAND, FL 32626

## New Principal Place of Business:

6891 NW 88 LANE  
CHEIFLAND, FL 32626 US

## Current Mailing Address:

2119 NW 11 DR  
CHEIFLAND, FL 32626

## New Mailing Address:

6891 NW 88 LANE  
CHEIFLAND, FL 32626 US

FEI Number: 22-3800997

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HALE, JIMMY R  
2119 NW 11 DR  
CHEIFLAND, FL 32626 US

## Name and Address of New Registered Agent:

HALE, JIMMY R  
6891 NW 88 LANE  
CHEIFLAND, FL 32626 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: JIMMY R. HALE

04/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: RUDOLPH HALE, JIMMY  
Address: 2119 NW 11 DR  
City-St-Zip: CHEIFLAND, FL 32626

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: HALE, JIMMY R PRES  
Address: 6891 NW 88 LANE  
City-St-Zip: CHEIFLAND, FL 32626 US

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: JIMMY R. HALE

PRES

04/11/2005

Electronic Signature of Signing Officer or Director

Date