

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000003597

FILED
Feb 25, 2010
Secretary of State

Entity Name: EMPLOYEE LEASING SOLUTIONS, INC.

Current Principal Place of Business:

1401 MANATEE AVENUE WEST
SUITE 600
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

1401 MANATEE AVENUE WEST
SUITE 600
BRADENTON, FL 34205

New Mailing Address:

FEI Number: 65-0814073 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, DANIEL P
1401 MANATEE AVENUE WEST
SUITE 600
BRADENTON, FL 34205 US

Name and Address of New Registered Agent:

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:

Title: PDC
Name: MULLIS, WILLIAM J
Address: 1401 MANATEE AVENUE WEST, SUITE 600
City-St-Zip: BRADENTON, FL 34205

Title: VTD
Name: VARNADORE, DAVID A
Address: 1401 MANATEE AVENUE WEST, SUITE 600
City-St-Zip: BRADENTON, FL 34205

Title: V
Name: RICHARDSON, C. EDWARD
Address: 1401 MANATEE AVENUE WEST, SUITE 600
City-St-Zip: BRADENTON, FL 34205

Title: VS
Name: KELLY, ROBERT W
Address: 1401 MANATEE AVENUE WEST, SUITE 600
City-St-Zip: BRADENTON, FL 34205

Title: V
Name: VARNADORE, BRIAN R
Address: 1401 MANATEE AVENUE WEST, SUITE 600
City-St-Zip: BRADENTON, FL 34205

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: WILLIAM J. MULLIS

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02/25/2010

Electronic Signature of Signing Officer or Director

_____ Date