

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H25844

Entity Name: ADP TOTALSOURCE FL XIV, INC.**Current Principal Place of Business:**10200 SUNSET DR
MIAMI, FL 33173**Current Mailing Address:**10200 SUNSET DR
ATTN: LEGAL DEPT
MIAMI, FL 33173**FEI Number:** 59-2452323**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	PRESIDENT
Name	MICHAUD , BRIAN
Address	10200 SUNSET DRIVE
City-State-Zip:	MIAMI FL 33173

Title	TREASURER
Name	CHHABRA, PAWAN
Address	5800 WINDWARD PKWY
City-State-Zip:	ALPHARETTA GA 30005

Title	DIRECTOR
Name	EISLER, BARRY
Address	10200 SUNSET DRIVE
City-State-Zip:	MIAMI FL 33173

Title	ASSISTANT SECRETARY
Name	KRAVETZ, LISSE
Address	10200 SUNSET DR
City-State-Zip:	MIAMI FL 33173

Title	VP
Name	ORIHUELA, CRISTIAN
Address	5800 WINDWARD PKWY
City-State-Zip:	ALPHARETTA GA 30005

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: BARRY EISLER

DIRECTOR

04/25/2019

Electronic Signature of Signing Officer/Director Detail_____
Date