## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000004789

Entity Name: ACCENTURE HR SERVICES INC.

FILED Jul 14, 2004 Secretary of State

Littly Name: Accelviore fix dervices, inc.						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
233 N. MICI CHICAGO,	HIGAN AVE., S IL 60601	TE. 1100				
Current Mailing Address:			New Maili	New Mailing Address:		
233 N. MICHIGAN AVE., STE. 1100 CHICAGO, IL 60601						
FEI Number:	FEI Number: 06-1606783 FEI Number Applied For() F		FEI Number Not Appl	icable()	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
C T 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  Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D ()E HUGHES, MICHA 100 S. WACKER CHICAGO, IL 600	DR.	Title: Name: Address: City-St-Zip:	D (X HUGHES, MICH 100 W. CLARK CHICAGO, IL 6		
Title: Name: Address: City-St-Zip:	D (X) E JOHNSON, PATT 5215 N. O'CONNO IRVING, TX 7503	OR BLVD.	Title: Name: Address: City-St-Zip:	( )	) Change ()Addition	
Title: Name: Address: City-St-Zip:	P () D MUCK, RANDY 5215 N. O'CONNO IRVING, TX 7503		Title: Name: Address: City-St-Zip:	DIANE, SHELG	AN AVE., STE. 1100	
Title: Name: Address: City-St-Zip:	ALBRIGHT, JOHN	I AVE., STE. 1100	Title: Name: Address: City-St-Zip:	( )	) Change ()Addition	
Title: Name: Address: City-St-Zip:	T () D PARSONS, KELL 5215 N. O'CONNO IRVING, TX 7503	OR BLVD.	Title: Name: Address: City-St-Zip:	KURT, ELTZ	) Change()Addition AN AVE., STE. 1100 60601	

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: JOHN ALBRIGHT S 07/14/2004