


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007 08:00 AM
Secretary of State

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| DOCUMENT # F05000003604 1. Entity Name TRINET SYSTEMS, INC. |  |
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| Principal Place of Business 295 UNIVERSITY AVENUE WESTWOOD, FL 02090 | Mailing Address 295 UNIVERSITY AVENUE WESTWOOD, FL 02090 |
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DO NOT WRITE IN THIS SPACE



01182007 No Chg-P CR2E034 (11/05)

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|---|---------------------------------------|
| 4. FEI Number 04-3166411 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301-2525

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
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10. OFFICERS AND DIRECTORS

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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PCD TINNELL, JAMES E 295 UNIVERSITY AVENUE WESTWOOD, FL 02090 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD PARKER, RICHARD E 295 UNIVERSITY AVENUE WESTWOOD, FL 02090 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD VITALE, MICHAEL P 295 UNIVERSITY AVENUE WESTWOOD, FL 02090 |
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U00000606017
01/30/07-80061-024 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplement to this report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with my address, with all other like empowered.

SIGNATURE: Walter S. Kordon Date: 1/18/07 Daytime Phone #: 781-234 3170