


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90289 001 ***300.00

DOCUMENT # F94000006379 1. Entity Name D & F PAYROLL AGENTS, INC.	
---	---

Principal Place of Business 9286 WARWICK BLVD. NEWPORT NEWS, VA 23607	Mailing Address 9286 WARWICK BLVD. NEWPORT NEWS, VA 23607
---	---

DO NOT WRITE IN THIS SPACE



02092007 No Chg-P CR2E034 (11/05)

4. FEI Number 54-1298452	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent Kenneth R. Marchman Hunter & Marchman, P.A. 227 West Park Avenue P. O. Box 340 Winter Park, FL 32790
--

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DRUCKER, WENDY C. 9286 WARWICK BLVD. NEWPORT NEWS, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/ASST. SECY. MELVIN, RONALD B. 9286 WARWICK BLVD. NEWPORT NEWS, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/ASST. SECY./D FALK, JR., DAVID C. 9286 WARWICK BLVD. NEWPORT NEWS, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/ASST. SEC./D FALK-TILLET, KELLIE 9286 WARWICK BLVD. NEWPORT NEWS, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T BUCK, J. GUY 9286 WARWICK BLVD. NEWPORT NEWS, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	↑ Please note changes

**DO NOT WRITE
IN THIS SPACE**

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 supplemental 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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Wendy C. Drucker

4-18-07

Date

757-928-6203

Daytime Phone #