2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 22, 2001 8:00 am Secretary of State

DOCU 1. Entity Nar	MENT # F950000	00996			Secretary 05-22-2001 9005		
	UTSOURCING CORPO	RATION					
Principal Pla	ce of Business	Mailing Address					
ONE ADP BOULEVARD ROSELAND NJ 07068		ONE ADP BOULEVARD MS433 ROSELAND NJ 07068				40₽	
USA 2. Principal Place of Business 3. Mailing Address			·	\dashv	770	435	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		_	DO NOT WRITE IN THIS	SPACE	
City & State		City & State			El Number 9-3299745	Applied Fo	
Zip	Country	Zip	Country		ertificate of Status Desired	8.75 Additional	aut
	6. Name and Address of Current	Registered Agent		7. Na	ame and Address of New Registered		\dashv
: 			Name				\neg
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324			City		FI	Zip Code	
		- :			FL ed agent, or both, in the State of Florida] '	
Tax filing requirement and elects to do so After MAY 1, 20			!! FEE IS \$150.00 01 Fee will be \$550. le to Department of		10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	ĺ
11.	OFFICERS AND D	IRECTORS	12.	ADDIT	IONS/CHANGES TO OFFICERS AND I	IRECTORS IN 11	
TITLE	PSD	Delete	TITLE		{	Change Addi	dition
NAME STREET ADDRESS CITY - ST - ZIP	BENSON, JAMES I ONE ADP BLVD ROSELAND NJ 07		NAME STREET ADDRESS CITY - S? - ZIP				dition
TITLE	VCD	Delete Delete	TITLE		Г	Change Addi	dition
NAME STREET ADDRESS	HAVILAND, RICH ONE ADP BLVD		NAME STREET ADDRESS		L	Orange Audi	
CITY - ST - ZIP	ROSELAND NJ 070	068	CITY - ST - ZIP			•	
TITLE NAME	AS SINGER, ROBERT	☐ Delete J	TITLE NAME			Change Addi	lition
STREET ADDRESS CITY - ST - ZIP	ONE ADP BLVD	\C0	STREET ADDRESS				l
TITLE	ROSELAND NJ 070	J 68 Delete	CITY - ST - ZIP			Change 1	
VAME	COLOTTI, RAYMON	1)	NAME		L	Change Addi	NON
STREET ADDRESS	ONE ADP BLVD		STREET ADDRESS				
CITY - ST - ZIP	ROSELAND NJ 070)68	CITY - ST - ZIP				
TITLE		Delete	TITLE			Change Addit	ition
WAME STREET ADORESS CITY - ST - ZIP			NAME STREET ADDRESS CITY - ST - ZIP			<u>—</u>	
TILE .		Delete	TITLE			Change Addit	tion
YAM E			NAME		L	_ ~ [_] *****	
STREET ADDRESS			STREET ADDRESS				
CITY - ST - ZIP			CITY - ST - ZIP				\Box
information officer or dir	indicated on this report or supplement	ntal report is true and accur er or trustee empowered to	ate and that my signatu execute this report as r	re shall leguired l	on 119.07(3)(i), Florida Statutes. I furthe have the same legal effect as if made ur by Chapter 607, Florida Statutes; and th	ider oath: that I am a	an 's

SIGNAT	TURE:
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ROBERT J. SINGER
OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR