

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

2000



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 20, 2000 8:00 am
Secretary of State

05-20-2000 90012 009 ***150.00

DOCUMENT # F95000002686

1. Corporation Name

TIME RESOURCE MANAGEMENT, INC.

Principal Place of Business

Mailing Address

1000 HOLCUMB WOODS PARKWAY
SUITE 116
ROSWELL GA 30076

1000 HOLCUMB WOODS PARKWAY
SUITE 116
ROSWELL GA 30076

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/02/1995

4. FEI Number

43-1713804

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

26 ONE ADP BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

27 City & State
ROSELAND, NJ

Zip

Country

25

Zip

Country

29 07068

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NRAI SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE COBS ☒ DELETE

NAME FARMER, JIM G
STREET ADDRESS 17 CLERMONT LANE
CITY-ST-ZIP ST. LOUIS MO 63124

TITLE CEO ☒ DELETE

NAME FARMER, JIM G
STREET ADDRESS 17 CLERMONT LANE
CITY-ST-ZIP ST. LOUIS MO 63124

TITLE PD ☒ DELETE

NAME YOUNG, ROBERT J
STREET ADDRESS 1000 HOLCUMB WOODS PARKWAY, #116
CITY-ST-ZIP ROSWELL GA 30076

TITLE D ☒ DELETE

NAME JOHNSON, PETER R
STREET ADDRESS 35 MEADOW HILL DRIVE
CITY-ST-ZIP TIBURON CA 94920

TITLE D ☒ DELETE

NAME DILLARD, ALEXANDER
STREET ADDRESS 1600 CANTRELL ROAD
CITY-ST-ZIP LITTLE ROCK AR 72201

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PSD ☒ Change ☐ Addition

JAMES B. BENSON
ONE ADP BLVD.
ROSELAND, NJ 07068

VPC ☒ Change ☐ Addition

RICHARD J. HAVILAND
ONE ADP BLVD.
ROSELAND, NJ 07068

ASD ☒ Change ☐ Addition

ROBERT J. SINGER
ONE ADP BLVD.
ROSELAND, NJ 07068

☐ Change ☐ Addition

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 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

JAMES B. BENSON

JAMES B. BENSON

4/24/00

973 994-5521

Date

Daytime Phone #