

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002455

FILED
May 23, 2011
Secretary of State

Entity Name: PAYROLL MANAGEMENT INC. OF DELAWARE

Current Principal Place of Business:

127 MIRACLE STRIP PARKWAY
SUITE N7
FT. WALTON BEACH, FL 32548

New Principal Place of Business:

127 MIRACLE STRIP PARKWAY
SUITE N-7
FT. WALTON BEACH, FL 32548

Current Mailing Address:

127 MIRACLE STRIP PARKWAY
SUITE N7
FT. WALTON BEACH, FL 32548

New Mailing Address:

127 MIRACLE STRIP PARKWAY
SUITE N-7
FT. WALTON BEACH, FL 32548

FEI Number: 59-3215020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CADENHEAD, CHRIS
543 HARBOR BOULEVARD, SUITE 202
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: MICKLE, D.C.
Address: 127 MIRACLE STRIP PKWY, STE N-7
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D
Name: MEYER, SUSAN W
Address: 127MIRACLE STRIP PKWY N7
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D
Name: FUZZELL, CHERIE
Address: 127 MIRACLE STRIP PARKWAY N7
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D
Name: MEYER, JOE
Address: 127 MIRACLE STRIP PARKWAY N7
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D
Name: CADENHEAD, CHRIS
Address: 127 MIRACLE STRIP PARKWAY N7
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D
Name: MILLER, RICK
Address: 127 MIRACLE STRIP PARKWAY N7
City-St-Zip: FORT WALTON BEACH, FL 32548

I hereby 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 all other like empowered.

SIGNATURE: D.C. MICKLE

P

05/23/2011

Electronic Signature of Signing Officer or Director

Date