


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 23, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # H02043 1. Entity Name THE ADP GROUP, INCORPORATED	
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Principal Place of Business 149 COCOANUT AVE SARASOTA, FL 34236	Mailing Address 149 COCOANUT AVE SARASOTA, FL 34236
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**DO NOT WRITE IN THIS SPACE**



04162007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2381135	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

PARKER, THEODORE  
 2033 MAIN ST., SUITE 100  
 SARASOTA, FL 34237

**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 \_\_\_\_\_  
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 FRANKLIN, BRUCE 149 COCOANUT AVE SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOWN, ROBERT M., III 149 COCOANUT AVE SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUAREZ-GONZALEZ, JAVIER 149 COCOANUT AVE SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M HOUK, PETER 149 COCONUT AVE SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

U00000723692  
 05/02/07-80081-020 158.75

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: *Peter Houk* **4/15/07** **991 957 1435**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #