

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L04000047416
 1. Entity Name
COMP & HR SOLUTIONS I, LLC



FILED
Aug 29, 2008 08:00 AM
Secretary of State

Principal Place of Business
8406-A BENJAMIN ROAD
TAMPA, FL 33634

Mailing Address
8406-A BENJAMIN ROAD
TAMPA, FL 33634



08262008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BRITTAIN, ROBERT G
2261 KENT DRIVE
LARGO, FL 33774

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008 In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRITTAIN, ROBERT G 2261 KENT DRIVE LARGO, FL 33774
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000958549
 08/29/08-80001-009 138.75

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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Robert Brittain **8/20/08**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #