2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# L08000103077

Entity Name: COMPREHENSIVE EMPLOYER OPTIONS, LLC

Current Principal Place of Business:

5700 MIDNIGHT PASS, SUITE 3
SARASOTA, FL 34242

New Principal Place of Business:

Current Mailing Address:

5700 MIDNIGHT PASS, SUITE 3
SARASOTA, FL 34242

New Mailing Address:

106 COLUMBUS
SARASOTA, FL 34242

FEI Number: 26-2209958 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DILLEY, BETH E
5700 MIDNIGHT PASS, SUITE 3
SARASOTA, FL 34242 US

Name and Address of New Registered Agent:

DILLEY, BETH E
106 COLUMBUS
SARASOTA, FL 34242 US

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: BETH E. DILLEY 04/22/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: DILLEY, BETH E
Address: 5700 MIDNIGHT PASS, SUITE 3
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: DILLEY, BETH E
Address: 106 COLUMBUS
City-St-Zip: SARASOTA, FL 34242

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: BETH E. DILLEY MGR 04/22/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date