

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001991

FILED
Jul 24, 2006
Secretary of State

Entity Name: CHECK POINT HR FLORIDA, LLC

Current Principal Place of Business:

2035 LINCOLN HIGHWAY, STE 1080
EDISON, NJ 08817

New Principal Place of Business:

4025 TAMPA ROAD
SUITE 1107A
OLDSMAR, FL 34677

Current Mailing Address:

2035 LINCOLN HIGHWAY, STE 1080
EDISON, NJ 08817

New Mailing Address:

4025 TAMPA ROAD
SUITE 1107A
OLDSMAR, FL 34677

FEI Number: 32-0220269 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ROSENTHAL, STEVEN
Address: 2035 LINCOLN HIGHWAY, STE 1080
City-St-Zip: EDISON, NJ 08817

Title: MGRM () Delete
Name: PADVA, TIMOTHY
Address: 2035 LINCOLN HIGHWAY, STE 1080
City-St-Zip: EDISON, NJ 08817

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PRES () Change (X) Addition
Name: ARCARO, ANTHONY M SR
Address: 4025 TAMPA ROAD SUITE 1107A
City-St-Zip: OLDSMAR, FL 34677

Title: VP () Change (X) Addition
Name: ARCARO, ANTHONY M JR
Address: 4025 TAMPA ROAD SUITE 1107A
City-St-Zip: OLDSMAR, FL 34677

Title: VP () Change (X) Addition
Name: ARCARO, JOHN D
Address: 4025 TAMPA ROAD
City-St-Zip: OLDSMAR, FL 34677

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTHONY M ARCARO SR

PRES

07/24/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date